PAGE 1 / 166

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

	or Other Than	An Authorized	Committee			Office Use Only	
NAME OF COMMITTEE (in full)	TYPE OR PRINT V	LAC	ample: If typing or the lines.	, type	12FE4M	5	
FARMERS GROUP, INC., FAR EXCHANGE POLITICAL ACTION					ANGE AND T	RUCK INSURA	NCE
ADDRESS (number and street)	2350 KERNER B	LVD., SUITE 250					
Check if different than previously reported. (ACC)	SAN RAFAEL				CA	94901	
2. FEC IDENTIFICATION NU	MBER ▼	CITY ▲		5	STATE A	ZIP CC	DDE 🛦
C C00135681		3. IS THIS REPORT	x NE		AM (A)	IENDED	
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports:	(b) Monthly Report Due On:	Feb 20 (M2) Mar 20 (M3)		ny 20 (M5) n 20 (M6)		20 (M8)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report (Q	1)	Apr 20 (M4)	x Jul	20 (M7)		20 (M10)	Jan 31 (YE)
July 15 Quarterly Report (Q	(c) 12-Day PRE-E		Primary (12P) Convention (12	(C)	General (Runoff (12R)
October 15 Quarterly Report (Q	·		` 	D D /	Y	in the	
January 31 Year-End Report (Yi July 31 Mid-Year		Election on				State of	of
Report (Non-election Year Only) (MY)	POST-	Election for the:	General (30G)		Runoff (3	0R)	Special (30S)
Termination Report (TER)		Election on	M = M /	D D /	Y	in the State of	of
5. Covering Period 06	01	2018	through	M M	30	2018	
I certify that I have examined thi Type or Print Name of Treasurer	Aurora, Joel, , ,	ne best of my kno	wledge and be	lief it is tru	e, correct and	d complete.	
Signature of Treasurer	a, Joel, , ,		[Electronically F	<i>[iled]</i> D	ate 07	/ 20 /	2018
NOTE: Submission of false, errone	ous, or incomplete	information may su	ubject the person	n signing th	is Report to th	ne penalties of 52	! U.S.C. § 30109
Office Use						FEC FOR Rev. 05/2	

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016) Page 2

Write or Type Committee Name

FARMERS GROUP, INC., FARMERS INSURANCE EXCHANGE, FIRE INSURANCE EXCHANGE AND TRUCK INSURANCE EXCHANGE POLITICAL ACTION COMMITTEE AKA FARMERS INSURANCE PAC 06 01 2018 06 30 2018 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 69750.18 January 1. 2018 (b) Cash on Hand at 76796.39 Beginning of Reporting Period..... 23438.14 109484.35 Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 179234.53 100234.53 6(a) and 6(c) for Column B)..... 49500.00 128500.00 7. Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 50734.53 50734.53 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016) Page 3

Write or Type Committee Name

FARMERS GROUP, INC., FARMERS INSURANCE EXCHANGE, FIRE INSURANCE EXCHANGE AND TRUCK INSURANCE EXCHANGE POLITICAL ACTION COMMITTEE AKA FARMERS INSURANCE PAC

Report Covering the Period: From:		o: 06 30 / 2018
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	14276.66	35946.89
(ii) Unitemized(iii) TOTAL (add	9161.48	70337.46
Lines 11(a)(i) and (ii)	23438.14	106284.35
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	23438.14	106284.35
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received15. Offsets To Operating Expenditures	0.00	0.00
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made	0.00	0.00
to Federal Candidates and Other Political Committees	0.00	3200.00
17. Other Federal Receipts (Dividends, Interest, etc.)18. Transfers from Non-Federal and Levin Funds	0.00	0.00
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	23438.14	109484.35
20. Total Federal Receipts (subtract Line 18(c) from Line 19)▶	23438.14	109484.35

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)	13111 1113 1 31134	Juliania Tour to Dute
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating		1 1 1 1 1 1 1 1
Expenditures(c) Total Operating Expenditures	0.00	0.00
(add 21(a)(i), (a)(ii), and (b))▶	0.00	0.00
Transfers to Affiliated/Other Party Committees	0.00	0.00
Contributions to Federal Candidates/Committees and Other Political Committees	49500.00	128500.00
Independent Expenditures	4 4 4	
(use Schedule E) Coordinated Party Expenditures (52 U.S.C. § 30116(d))	0.00	0.00
(use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loans MadeRefunds of Contributions To: (a) Individuals/Persons Other	0.00	0.00
Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
Other Disbursements (Including		
Non-Federal Donations)	0.00	0.00
Federal Election Activity (52 U.S.C. § 30101(20) (a) Allocated Federal Election Activity (from Schedule H6) (i) Federal Share	0.00	0.00
· ·	0.00	0.00
(ii) "Levin" Share(b) Federal Election Activity Paid	0.00	0.00
Entirely With Federal Funds	0.00	0.00
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	40500.00	4000000
Total Federal Disbursements	49500.00	128500.00
(subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	49500.00	128500.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	23438.14	106284.35
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	23438.14	106284.35
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	0.00
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

FOR LINE NUMBER: PAGE 6 OF Use separate schedule(s) (check only one)

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and State or for commercial purposes, other than using the na		
NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS INS INSURANCE EXCHANGE POLITICAL AC		
Full Name of Individual (Last, First, Middle Initial ABRAMSON, MARC E, , , Mailing Address 540 SHERIDAN RD #1 City EVANSTON FEC ID number of contributing federal political committee. Name of Employer (for Individual) FARMERS INSURANCE EXCHANGE		Date of Receipt M M M / D D / 2018 Transaction ID : INCA165378 Amount of Each Receipt this Period 50.00 Memo Item
Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) ABRAMSON, MARC E, , , Mailing Address 540 SHERIDAN RD #1) or Full Organization Name	Date of Receipt
City EVANSTON FEC ID number of contributing federal political committee.	State Zip Code IL 60202	Transaction ID : INCA165925 Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) FARMERS INSURANCE EXCHANGE Receipt For: Primary General Other (specify) ▼	Occupation (for Individual) MANAGING ATTORNEY Aggregate Year-to-Date ▼ 650.00	Memo Item
Full Name of Individual (Last, First, Middle Initial ABRAMSON, MARC E, , , Mailing Address 540 SHERIDAN RD #1 City EVANSTON FEC ID number of contributing federal political committee. Name of Employer (for Individual) FARMERS INSURANCE EXCHANGE Receipt For: Primary General Other (specify)	or Full Organization Name State	Date of Receipt M M M / 29
SUBTOTAL of Receipts This Page (optional)		150.00
TOTAL This Period (last page this line number onl	ly)	·

FOR LINE NUMBER: PAGE 7 OF 166 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS INSURANCE EXCHANGE, FIRE INSURANCE EXCHANGE AND TRUCK INSURANCE EXCHANGE POLITICAL ACTION COMMITTEE AKA FARMERS INSURANCE PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name ALDREDGE, DEBORAH, , , Date of Receipt Mailing Address 25132 KARIE LANE 01 2018 City Zip Code State Transaction ID: INCA165680 SANTA CLARITA CA 91350 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS GROUP INC. CHIEF ADMINISTRATION OFFI Receipt For: Aggregate Year-to-Date ▼ Primary General 390.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** ALDREDGE, DEBORAH, , , Date of Receipt Mailing Address 25132 KARIE LANE 15 2018 City State Zip Code Transaction ID: INCA166227 SANTA CLARITA CA 91350 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS GROUP INC. CHIEF ADMINISTRATION OFFI Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 390.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. ALDREDGE, DEBORAH, , , Date of Receipt Mailing Address 25132 KARIE LANE 29 2018 City State Zip Code Transaction ID: INCA166794 CA SANTA CLARITA 91350 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS GROUP INC. CHIEF ADMINISTRATION OFFI Receipt For: Aggregate Year-to-Date ▼ Primary General 390.00 Other (specify) 90.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 166 (check only one)

| The page | PAGE 8 OF 166 | PAGE 8

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS INSURANCE EXCHANGE, FIRE INSURANCE EXCHANGE AND TRUCK INSURANCE EXCHANGE POLITICAL ACTION COMMITTEE AKA FARMERS INSURANCE PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name ANDERSEN, STEVEN K, , , Date of Receipt Mailing Address 21414 WINDING PATH WAY 01 2018 City Zip Code State Transaction ID: INCA165343 TX RICHMOND 77406 Amount of Each Receipt this Period FEC ID number of contributing C 31.84 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) FARMERS GROUP INC. DIRECTOR OF HOME OFFICE A Receipt For: Aggregate Year-to-Date ▼ Primary General 407.41 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. ANDERSEN, STEVEN K, , , Date of Receipt Mailing Address 21414 WINDING PATH WAY 15 2018 City State Zip Code Transaction ID: INCA165891 **RICHMOND** TX 77406 Amount of Each Receipt this Period FEC ID number of contributing 31.84 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS GROUP INC. DIRECTOR OF HOME OFFICE A Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 407.41 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. ANDERSEN, STEVEN K, , , Date of Receipt Mailing Address 21414 WINDING PATH WAY 29 2018 City Zip Code State Transaction ID: INCA166463 TX **RICHMOND** 77406 Amount of Each Receipt this Period FEC ID number of contributing C 31.84 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS GROUP INC. DIRECTOR OF HOME OFFICE A Receipt For: Aggregate Year-to-Date ▼ Primary General 407.41 Other (specify) 95.52 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 7

FOR LINE NUMBER: PAGE 9 OF 166 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page 13 14 15 16

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\rangle	NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS INSUINSURANCE EXCHANGE POLITICAL ACT								AND T	RUC	K		
١.	Full Name of Individual (Last, First, Middle Initial) AREVALO, ARNOLD B., , ,	or Full Org	ganization Name	D	Date of Receipt								
	Mailing Address P.O. BOX 822				M = M 06	1	Γ	28	/ Y	20°	18	Y	
	,	State	Zip Code		Trans	acti	ion	ID : I	NCA16	6360			
	Sugar Land	TX	77487	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	84.00											
	Name of Employer (for Individual) FARMERS GROUP, INC.												
		ggregate Y	ear-to-Date ▼										
	Primary General Other (specify) ▼												
3.	Full Name of Individual (Last, First, Middle Initial) BADGETT, LEEANN G, , ,	Date of Receipt											
	Mailing Address 7505 COOPER POINT RD NW			06 01 2018								Y	
	,	State	Zip Code						NCA16				
	OLYMPIA	WA	98502	- A	mount	of	Ea	ach Re	eceipt t	his Pe	riod		
	FEC ID number of contributing federal political committee.			Ţ	24.48								
	Name of Employer (for Individual) FARMERS INSURANCE EXCHANGE		oation (for Individual) NCIAL CONTROLLER AND]	Memo Item								
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	Other (specify) ▼		313,27										
٥.	Full Name of Individual (Last, First, Middle Initial) BADGETT, LEEANN $G,$,	or Full Org	ganization Name	D	ate of	Re	ecei	ipt					
	Mailing Address 7505 COOPER POINT RD NW] [M M M	1	L	15	/ C	201	8	Y	
	City SUMPIA	State WA	Zip Code 98502				_		INCA16		riod		
	EEC ID number of contributing				inount	. 01	J	icii ne	eceipt t	IIIS FE	24.4	8	
	Name of Employer (for Individual) FARMERS INSURANCE EXCHANGE		oation (for Individual)		Memo Item								
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FOR LINE NUMBER: PAGE 11 OF 166 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page 13 14 15 16

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	F	OR	LINE	NU	MBER	PAGE	•	12 OF	•	166	
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for each category of the Detailed Summary Page		×	11a		11b		11c		12		
			13		14		15		16		17

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FOR LINE NUMBER: PAGE 13 OF 166 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page 13 14 15 16

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FOR LINE NUMBER: PAGE 14 OF Use separate schedule(s) (check only one)

TEMIZED RECEIPTS	for each category of Detailed Summary	Y 44a 44a 40
		d by any person for the purpose of soliciting contributions I committee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS ININSURANCE EXCHANGE POLITICAL A		RE INSURANCE EXCHANGE AND TRUCK ARMERS INSURANCE PAC
Full Name of Individual (Last, First, Middle Initial BALEY, CHARLES A, , , Mailing Address 12313 WILLOW FOREST DRIV City MOORPARK FEC ID number of contributing federal political committee. Name of Employer (for Individual) FARMERS GROUP INC. Receipt For: Primary General Other (specify)	or Full Organization Name State	Date of Receipt M M M / 29 2018 Transaction ID : INCA166507 Amount of Each Receipt this Period 40.55 Memo Item
Full Name of Individual (Last, First, Middle Initial BIGELOW, MICHAEL D, , , Mailing Address 6269 EGYPT VALLEY AVE NE City ROCKFORD FEC ID number of contributing federal political committee. Name of Employer (for Individual) FARMERS GROUP INC. Receipt For: Primary General Other (specify)	State Zip Code MI 49341 C Occupation (for Individual) HEAD OF PRINT & DOCL Aggregate Year-to-Date	
Full Name of Individual (Last, First, Middle Initial BIGELOW, MICHAEL D, , , Mailing Address 6269 EGYPT VALLEY AVE NE City ROCKFORD FEC ID number of contributing federal political committee. Name of Employer (for Individual) FARMERS GROUP INC. Receipt For: Primary General Other (specify)	State Zip Code MI 49341 C Occupation (for Individual) HEAD OF PRINT & DOCU Aggregate Year-to-Date	_
SUBTOTAL of Receipts This Page (optional)		80.55
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\rangle	NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS INSINSURANCE EXCHANGE POLITICAL AC									ND	TRL	JCK				
١.	Full Name of Individual (Last, First, Middle Initial) BIGELOW, MICHAEL D, , ,	or Full O	Organi	zation Name		Date of	Re	cei	ipt							
	Mailing Address 6269 EGYPT VALLEY AVE NE				06 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y											
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	ROCKFORD	MI		49341	Amount of Each Receipt this Period											
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	Name of Employer (for Individual) FARMERS GROUP INC.		Me	emo) Ite	em										
	Receipt For: Primary General Other (specify) ▼															
3.	Full Name of Individual (Last, First, Middle Initial) BOWSER, KIMBERLY L, , ,	zation Name		Date of	Re	cei	ipt									
	Mailing Address 1155 CROYDEN ROAD] [M M	′	Γ	01	′ [Y	2018	Y			
	City	State		Zip Code	<u> </u>	Transaction ID : INCA165660 Amount of Each Receipt this Period										
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	Name of Employer (for Individual) FARMERS GROUP INC.		•	on (for Individual) DRY PRODUCT LEAD -]	Me	emo) Ite	em							
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<u> </u>	Full Name of Individual (Last, First, Middle Initial) BOWSER, KIMBERLY L, , ,	or Full O	Organi	zation Name		Date of	Re	cei	ipt							
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	City LYNDHURST	State OH	4	Zip Code 44124	Δ	Trans						07 Period				
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	Name of Employer (for Individual) FARMERS GROUP INC.		•	on (for Individual) ORY PRODUCT LEAD -		Me	emo) It	em							
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FOR LINE NUMBER: PAGE 16 OF 166 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page 13 14 15 16

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dress of any political committee to solicit contributions from such committee.												

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FOR LINE NUMBER: PAGE 18 OF 166 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page 13 14 15 16

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\rangle	NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS IN INSURANCE EXCHANGE POLITICAL A							
۹.	Full Name of Individual (Last, First, Middle Initia BURTCH, DOUGLAS R, , , Mailing Address 12952 PLANTERS CREEK CIR		anization Name	Date of Receipt				
	City	State FL	Zip Code	06 29 2018 Transaction ID : INCA166766				
	FEC ID number of contributing federal political committee.	С	32224	Amount of Each Receipt this Period 40.00				
	Name of Employer (for Individual) FARMERS GROUP INC. Receipt For:	HEAD	ation (for Individual) OF REGIONAL SALES -	Memo Item				
	Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 520.00					
3.	Full Name of Individual (Last, First, Middle Initial CAWLEY, MARK C , , ,	al) or Full Org	anization Name	Date of Receipt				
	Mailing Address 2 ACADEMY LANE			06 01 Y Y Y Y Y Y				
	City WAYNE	State PA	Zip Code 19087	Transaction ID : INCA165710 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		29.50				
	Name of Employer (for Individual) FARMERS GROUP INC.		ation (for Individual) DRPORATE COUNSEL	Memo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 377.48					
С.	Full Name of Individual (Last, First, Middle Initial CAWLEY, MARK C, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name CAWLEY, MARK C, , ,						
	Mailing Address 2 ACADEMY LANE			06 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
	City	State	Zip Code	Transaction ID : INCA166256				

Receipt For: Primary General Other (specify) Full Name of Individual (Last, First, Middle Initial c. CAWLEY, MARK C, , , Mailing Address 2 ACADEMY LANE City WAYNE Amount of Each Receipt this Period FEC ID number of contributing C 29.50 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) SR CORPORATE COUNSEL FARMERS GROUP INC. Receipt For: Aggregate Year-to-Date ▼ Primary General 377.48 Other (specify) 99.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER: PAGE 21 OF 166 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 13 14 15 16

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FOR LINE NUMBER: PAGE 22 OF 166 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page 13 14 15 16

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NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS IN INSURANCE EXCHANGE POLITICAL A									
Full Name of Individual (Last, First, Middle Initial CROSETTI, PAUL A, , , Mailing Address 21600 SAN JOSE ST. City CHATSWORTH FEC ID number of contributing federal political committee. Name of Employer (for Individual) FARMERS GROUP INC. Receipt For: Primary General	State CA C Occ HE		Date of Receipt Mo6 29 2018 Transaction ID : INCA166435 Amount of Each Receipt this Period 35.00 Memo Item						
Other (specify) ▼ Full Name of Individual (Last, First, Middle Initia	al) or Full C	455.00 Organization Name							
B. DAHINDEN, GREGORY A, , , Mailing Address 20600 SW KAWANDA CT City	State	Zip Code	Date of Receipt M						
TUALATIN FEC ID number of contributing federal political committee. Name of Employer (for Individual)	C	97062	Amount of Each Receipt this Period 22.78 Memo Item						
FARMERS GROUP INC. Receipt For: Primary General Other (specify) Other (specify)	BU	SINESS UNIT COMPLIANCE Year-to-Date ▼ 292.64							
Full Name of Individual (Last, First, Middle Initia DAHINDEN, GREGORY A, , , Mailing Address 20600 SW KAWANDA CT	al) or Full C	Organization Name	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
City TUALATIN FEC ID number of contributing federal political committee. Name of Employer (for Individual) FARMERS GROUP INC. Receipt For: Primary General Other (specify)	BUS	Zip Code 97062 upation (for Individual) SINESS UNIT COMPLIANCE Year-to-Date ▼ 292.64	Amount of Each Receipt this Period 22.78 Memo Item						
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13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS INSURANCE EXCHANGE, FIRE INSURANCE EXCHANGE AND TRUCK INSURANCE EXCHANGE POLITICAL ACTION COMMITTEE AKA FARMERS INSURANCE PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name DAHINDEN, GREGORY A, , , Date of Receipt Mailing Address 20600 SW KAWANDA CT 29 2018 City Zip Code State Transaction ID: INCA166694 OR **TUALATIN** 97062 Amount of Each Receipt this Period FEC ID number of contributing C 22.78 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) FARMERS GROUP INC. **BUSINESS UNIT COMPLIANCE** Receipt For: Aggregate Year-to-Date ▼ Primary General 292.64 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. DALY, KEITH G, , , Date of Receipt Mailing Address 2516 THREE SPRINGS DR. 2018 City State Zip Code Transaction ID: INCA165242 WESTLAKE VILLAGE CA 91361 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS GROUP INC. PRESIDENT OF PERSONAL LIN Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 520.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. DALY, KEITH G. , , Date of Receipt Mailing Address 2516 THREE SPRINGS DR. 15 2018 City Zip Code State Transaction ID: INCA165790 CA WESTLAKE VILLAGE 91361 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS GROUP INC. PRESIDENT OF PERSONAL LIN Receipt For: Aggregate Year-to-Date ▼ Primary General 520.00 Other (specify) 102.78 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

FOR LINE NUMBER: PAGE 25 OF 166 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page 13 14 15 16

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NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS IN INSURANCE EXCHANGE POLITICAL A									
Full Name of Individual (Last, First, Middle Initianal DAVIS, DIANE C, , , Mailing Address 32706 SE 76TH STREET City FALL CITY FEC ID number of contributing federal political committee. Name of Employer (for Individual) FARMERS INSURANCE EXCHANGE Receipt For: Primary General	State WA C Occ PRI		Date of Receipt M M M						
Other (specify) ▼ Full Name of Individual (Last, First, Middle Initi	al) or Full C	650.00 Organization Name							
City OKLAHOMA CITY FEC ID number of contributing federal political committee.	State OK	Zip Code 73162	Date of Receipt M 06						
Name of Employer (for Individual) FARMERS GROUP INC. Receipt For: Primary General Other (specify) ▼	DIF	eupation (for Individual) RECTOR GOVERNMENT & IND Year-to-Date ▼ 845.00	Memo Item						
Full Name of Individual (Last, First, Middle Initical DECKER, KIM, , , Mailing Address 11904 BLUE WAY AVE City OKLAHOMA CITY FEC ID number of contributing federal political committee. Name of Employer (for Individual) FARMERS GROUP INC. Receipt For: Primary General Other (specify)	State OK	Zip Code 73162 upation (for Individual) ECTOR GOVERNMENT & IND Year-to-Date ▼ 845.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
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FOR LINE NUMBER: PAGE 27 OF 166 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page 13 14 15 16

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FOR LINE NUMBER: PAGE 28 OF 166 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 13 14 15 16

Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS INSURANCE EXCHANGE, FIRE INSURANCE EXCHANGE AND TRUCK INSURANCE EXCHANGE POLITICAL ACTION COMMITTEE AKA FARMERS INSURANCE PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name DENICHOLAS, JAMES, , , Date of Receipt Mailing Address 16937 GAULT ST 29 2018 City Zip Code State Transaction ID: INCA166686 CA **VAN NUYS** 91406 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) FARMERS GROUP INC. ASSISTANT TREASURER Receipt For: Aggregate Year-to-Date ▼ Primary General 260.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. DENIS, PATTI C, , , Date of Receipt Mailing Address 10473 CANOSA WAY 2018 City State Zip Code Transaction ID: INCA165437 WESTMINSTER CO 80234 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS INSURANCE EXCHANGE DIRECTOR, BUSINESS RELATI Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 260.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. DENIS, PATTI C, , , Date of Receipt Mailing Address 10473 CANOSA WAY 15 2018 City Zip Code State Transaction ID: INCA165984 CO WESTMINSTER 80234 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS INSURANCE EXCHANGE DIRECTOR, BUSINESS RELATI Receipt For: Aggregate Year-to-Date ▼ Primary General 260.00 Other (specify) 60.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 7

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FOR LINE NUMBER: PAGE 30 OF 166 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page 13 14 15 16

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NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS INSUINSURANCE EXCHANGE POLITICAL ACT									
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LYNNWOOD FEC ID number of contributing federal political committee. Name of Employer (for Individual) FARMERS INSURANCE EXCHANGE	7 7 7	Date of Receipt M M M / D D / 2018 Transaction ID : INCA165638 Amount of Each Receipt this Period 20.00 Memo Item							
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Full Name of Individual (Last, First, Middle Initial DROUBAY, DIANE, , , Mailing Address 7504 191ST ST SW City LYNNWOOD FEC ID number of contributing federal political committee. Name of Employer (for Individual) FARMERS INSURANCE EXCHANGE Receipt For: Primary General Other (specify)	State WA C Occ PR6		Date of Receipt M M M / 29 2018 Transaction ID : INCA166752 Amount of Each Receipt this Period 20.00 Memo Item						
Full Name of Individual (Last, First, Middle Initial DUKES, AMY J, , , Mailing Address 13705 BOND ST City OVERLAND PARK FEC ID number of contributing federal political committee. Name of Employer (for Individual) FARMERS GROUP INC. Receipt For: Primary General Other (specify)	State KS	Zip Code 66221 Supation (for Individual) COMPLIANCE DIRECTOR Year-to-Date 260.00	Date of Receipt M M M / D D / 2018 Transaction ID : INCA165555 Amount of Each Receipt this Period 20.00 Memo Item						
Full Name of Individual (Last, First, Middle Inition DUKES, AMY J, , , Mailing Address 13705 BOND ST City OVERLAND PARK FEC ID number of contributing federal political committee. Name of Employer (for Individual) FARMERS GROUP INC. Receipt For: Primary General Other (specify)	State KS	Zip Code 66221 upation (for Individual) COMPLIANCE DIRECTOR Year-to-Date ▼ 260.00	Date of Receipt Mod / 15 2018 Transaction ID: INCA166102 Amount of Each Receipt this Period 20.00 Memo Item						
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FOR LINE NUMBER: PAGE 35 OF 166 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page 13 14 15 16

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FOR LINE NUMBER: PAGE 36 OF 166 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page 13 14 15 16

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<u> </u>	Full Name of Individual (Last, First, Middle Initial) FELKS, TIMOTHY E, , ,	or Full O	Organ	ization Name		Date of	Re	ece	eipt				
	Mailing Address 357 CHERRY HILLS COURT City	State	ı	Zip Code		M M	′		15	J	Υ 100 0 100	2018	Y
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NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS IN INSURANCE EXCHANGE POLITICAL F			
Full Name of Individual (Last, First, Middle Initial FELKS, TIMOTHY E, , , Mailing Address 357 CHERRY HILLS COURT City NEWBURY PARK FEC ID number of contributing federal political committee. Name of Employer (for Individual) FARMERS INSURANCE EXCHANGE Receipt For: Primary General	State CA Occ HE		Date of Receipt Mo 29 2018 Transaction ID: INCA166626 Amount of Each Receipt this Period 30.00 Memo Item
Other (specify) ▼ Full Name of Individual (Last, First, Middle Initi FELTON, JOHN R, , , Mailing Address 2804 BRECKENRIDGE CIR	,		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City AURORA FEC ID number of contributing federal political committee. Name of Employer (for Individual) FARMERS INSURANCE EXCHANGE Receipt For: Primary General Other (specify) ▼	HIG	Zip Code 60504 cupation (for Individual) SH EXPOSURE ATTORNEY Year-to-Date ▼ 520.00	Transaction ID : INCA165700 Amount of Each Receipt this Period 40.00 Memo Item
Full Name of Individual (Last, First, Middle Initial FELTON, JOHN R, , , Mailing Address 2804 BRECKENRIDGE CIR City AURORA FEC ID number of contributing federal political committee. Name of Employer (for Individual) FARMERS INSURANCE EXCHANGE Receipt For: Primary General Other (specify)	State IL Occ HIG	Zip Code 60504 upation (for Individual) H EXPOSURE ATTORNEY Year-to-Date ▼ 520.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
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Mailir	ng Address 748 TIMACUAN BLVD.			06 01 Y Y Y Y Y Y
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Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS INSURANCE EXCHANGE, FIRE INSURANCE EXCHANGE AND TRUCK INSURANCE EXCHANGE POLITICAL ACTION COMMITTEE AKA FARMERS INSURANCE PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name FOLEY, PAUL F, , , Date of Receipt Mailing Address 760 SW 17TH ST 29 2018 City Zip Code State Transaction ID: INCA166763 **BOCA RATON** FL 33486 Amount of Each Receipt this Period FEC ID number of contributing C 60.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) FARMERS GROUP INC. CHIEF OPERATING OFFICER, Receipt For: Aggregate Year-to-Date ▼ Primary General 780.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. FOURNELL, WILLIAM, , , Date of Receipt Mailing Address 594 27TH STREET 2018 City State Zip Code Transaction ID: INCA165622 CA MANHATTAN BEACH 90266 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS GROUP INC. HEAD OF AGENCY MARKETING Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 260.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. FOURNELL, WILLIAM, , , Date of Receipt Mailing Address 594 27TH STREET 15 2018 City State Zip Code Transaction ID: INCA166169 CA MANHATTAN BEACH 90266 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS GROUP INC. HEAD OF AGENCY MARKETING Receipt For: Aggregate Year-to-Date ▼ Primary General 260.00 Other (specify) 100.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS INSURANCE EXCHANGE, FIRE INSURANCE EXCHANGE AND TRUCK INSURANCE EXCHANGE POLITICAL ACTION COMMITTEE AKA FARMERS INSURANCE PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name FOURNELL, WILLIAM, , , Date of Receipt Mailing Address 594 27TH STREET 29 2018 City Zip Code State Transaction ID: INCA166737 MANHATTAN BEACH CA 90266 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) FARMERS GROUP INC. HEAD OF AGENCY MARKETING Receipt For: Aggregate Year-to-Date ▼ Primary General 260.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. FOX, HILARY B, , , Date of Receipt Mailing Address 8311 WINDBREAK TRAIL NORTH 06 2018 City State Zip Code Transaction ID: INCA165699 LAKE ELMO MN 55042 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS INSURANCE EXCHANGE SUPERVISING ATTORNEY Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 220.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. FREELIN, HEATHER M, , , Date of Receipt Mailing Address 1504 CHESTNUT AVE. 01 2018 City State Zip Code Transaction ID: INCA165629 CA MANHATTAN BEACH 90266 Amount of Each Receipt this Period FEC ID number of contributing C 40.76 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS GROUP INC. CORPORATE LITIGATION SUPE Receipt For: Aggregate Year-to-Date ▼ Primary General 513.78 Other (specify) 80.76 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 ___

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS INSURANCE EXCHANGE, FIRE INSURANCE EXCHANGE AND TRUCK INSURANCE EXCHANGE POLITICAL ACTION COMMITTEE AKA FARMERS INSURANCE PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name FREELIN, HEATHER M, , , Date of Receipt Mailing Address 1504 CHESTNUT AVE. 15 2018 City Zip Code State Transaction ID: INCA166176 MANHATTAN BEACH CA 90266 Amount of Each Receipt this Period FEC ID number of contributing C 40.76 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS GROUP INC. CORPORATE LITIGATION SUPE Receipt For: Aggregate Year-to-Date ▼ Primary General 513.78 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** FREELIN, HEATHER M, , , Date of Receipt Mailing Address 1504 CHESTNUT AVE. 06 2018 City State Zip Code Transaction ID: INCA166743 MANHATTAN BEACH CA 90266 Amount of Each Receipt this Period FEC ID number of contributing 40.76 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS GROUP INC. CORPORATE LITIGATION SUPE Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 513.78 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. GALITSKI, FRANK V.,, Date of Receipt Mailing Address 11700 RED OAK VALLEY LANE 01 2018 City Zip Code State Transaction ID: INCA165368 TX **AUSTIN** 78732 Amount of Each Receipt this Period FEC ID number of contributing 24.77 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS GROUP INC. **DIRECTOR GOVERNMENT AFFAI** Receipt For: Aggregate Year-to-Date ▼ Primary General 316.55 Other (specify) 106.29 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 - - 7

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Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS INSURANCE EXCHANGE, FIRE INSURANCE EXCHANGE AND TRUCK INSURANCE EXCHANGE POLITICAL ACTION COMMITTEE AKA FARMERS INSURANCE PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name GANNON, MATTHEW, , , Date of Receipt Mailing Address 3713 RIVERWOOD RD. 15 2018 City Zip Code State Transaction ID: INCA166278 VA **ALEXANDRIA** 22309 Amount of Each Receipt this Period FEC ID number of contributing C 45.10 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) FARMERS GROUP INC. HD OF FEDERAL & EASTERN S Receipt For: Aggregate Year-to-Date ▼ Primary General 586.30 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. GANNON, MATTHEW, , , Date of Receipt Mailing Address 3713 RIVERWOOD RD. 2018 City State Zip Code Transaction ID: INCA166845 **ALEXANDRIA** VA 22309 Amount of Each Receipt this Period FEC ID number of contributing 45.10 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS GROUP INC. HD OF FEDERAL & EASTERN S Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 586.30 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. GARDNER, DANIEL L, , , Date of Receipt Mailing Address 23913 MOBILE ST 01 2018 City State Zip Code Transaction ID: INCA165374 CA **WEST HILLS** 91307 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS GROUP INC. CORPORATE LITIGATION SUPE Receipt For: Aggregate Year-to-Date ▼ Primary General 650.00 Other (specify) 140.20 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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FOR LINE NUMBER: PAGE 51 OF 166 (check only one)

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City CLAREMONT	State CA	Zip Code 91711						NCA16			
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Name of Employer (for Individual) FARMERS GROUP INC.		pation (for Individual) D OF SPECIALTY AND NON		Me	emo	o Ite	:em				
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FOR LINE NUMBER: PAGE 53 OF 166 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page 13 14 15 16

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FOR LINE NUMBER: PAGE 54 OF 166 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page 13 14 15 16

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NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS IN INSURANCE EXCHANGE POLITICAL A			
Full Name of Individual (Last, First, Middle Initi A. HARM, THERESA L, , , Mailing Address 2614 PENNLYN DR City BOOTHWYN FEC ID number of contributing federal political committee. Name of Employer (for Individual) FARMERS GROUP INC. Receipt For: Primary Other (specify) Other (specify)	State PA Occ HE		Date of Receipt 06 01 2018 Transaction ID : INCA165250 Amount of Each Receipt this Period 20.00 Memo Item
Full Name of Individual (Last, First, Middle Initial HARM, THERESA L, , , , Mailing Address 2614 PENNLYN DR City BOOTHWYN FEC ID number of contributing federal political committee. Name of Employer (for Individual) FARMERS GROUP INC. Receipt For: Primary General Other (specify) Other (specify)	State PA C	4 4	Date of Receipt M
Full Name of Individual (Last, First, Middle Initial HARM, THERESA L, , , Mailing Address 2614 PENNLYN DR City BOOTHWYN FEC ID number of contributing federal political committee. Name of Employer (for Individual) FARMERS GROUP INC. Receipt For: Primary General Other (specify)	State PA C	Zip Code 19061 upation (for Individual) AD OF 21ST FINANCIAL PL Year-to-Date 260.00	Date of Receipt Mo6 29 2018 Transaction ID: INCA166370 Amount of Each Receipt this Period 20.00 Memo Item
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FOR LINE NUMBER: PAGE 56 OF 166 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page 13 14 15 16

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NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS IN INSURANCE EXCHANGE POLITICAL A			
Full Name of Individual (Last, First, Middle Initial HARTSUYKER, CRAIG L, , , Mailing Address 1356 HARMONY COURT City THOUSAND OAKS FEC ID number of contributing federal political committee. Name of Employer (for Individual) FARMERS INSURANCE EXCHANGE Receipt For: Primary General Other (specify)	State CA C Occ REC		Date of Receipt M
Full Name of Individual (Last, First, Middle Initial HARTSUYKER, CRAIG L, , , Mailing Address 1356 HARMONY COURT City THOUSAND OAKS FEC ID number of contributing federal political committee. Name of Employer (for Individual) FARMERS INSURANCE EXCHANGE Receipt For: Primary General Other (specify)	State CA C	<u> </u>	Date of Receipt M M
Full Name of Individual (Last, First, Middle Initial HARTSUYKER, CRAIG L, , , Mailing Address 1356 HARMONY COURT City THOUSAND OAKS FEC ID number of contributing federal political committee. Name of Employer (for Individual) FARMERS INSURANCE EXCHANGE Receipt For: Primary General Other (specify)	State CA C	Zip Code 91362 upation (for Individual) GIONAL HEAD OF CLAIMS L Year-to-Date ▼ 260.00	Date of Receipt Mo6 29 2018 Transaction ID: INCA166723 Amount of Each Receipt this Period 20.00 Memo Item
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NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS INSURANCE EXCHANGE POLITICAL			
Full Name of Individual (Last, First, Middle In HAYES, JANET L, , , Mailing Address 14401 NORWOOD ST. City LEAWOOD FEC ID number of contributing federal political committee. Name of Employer (for Individual) FARMERS INSURANCE EXCHANGE Receipt For: Primary General Other (specify)	State KS C		Date of Receipt Mod 01 2018 Transaction ID : INCA165429 Amount of Each Receipt this Period 20.00 Memo Item
Full Name of Individual (Last, First, Middle In HAYES, JANET L, , , Mailing Address 14401 NORWOOD ST. City LEAWOOD FEC ID number of contributing federal political committee. Name of Employer (for Individual) FARMERS INSURANCE EXCHANGE Receipt For: Primary General Other (specify)	State KS C	Zip Code 66224 Eupation (for Individual) AD OF AUTO ZONE Year-to-Date ▼ 260.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name of Individual (Last, First, Middle In HAYES, JANET L, , , Mailing Address 14401 NORWOOD ST. City LEAWOOD FEC ID number of contributing federal political committee. Name of Employer (for Individual) FARMERS INSURANCE EXCHANGE Receipt For: Primary General Other (specify)	State KS	Zip Code 66224 upation (for Individual) AD OF AUTO ZONE Year-to-Date ▼ 260.00	Date of Receipt Mo6 29 2018 Transaction ID: INCA166547 Amount of Each Receipt this Period 20.00 Memo Item
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NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS INS INSURANCE EXCHANGE POLITICAL AC		
Full Name of Individual (Last, First, Middle Initial) A. HENLE, JOHN A, , , Mailing Address 841 PASEO DE LEON City NEWBURY PARK FEC ID number of contributing federal political committee. Name of Employer (for Individual) FARMERS GROUP INC. Receipt For: Primary General Other (specify)	or Full Organization Name State Zip Code CA 91320 C Occupation (for Individual) HEAD OF FIELD OPERATION Aggregate Year-to-Date ▼ 784.0	
Full Name of Individual (Last, First, Middle Initial) 3. HENLE, JOHN A, , , Mailing Address 841 PASEO DE LEON City NEWBURY PARK FEC ID number of contributing federal political committee. Name of Employer (for Individual) FARMERS GROUP INC. Receipt For: Primary General Other (specify)	or Full Organization Name State Zip Code 91320 C Occupation (for Individual) HEAD OF FIELD OPERATION 784.0	-
Full Name of Individual (Last, First, Middle Initial) HENLE, JOHN A, , , Mailing Address 841 PASEO DE LEON City NEWBURY PARK FEC ID number of contributing federal political committee. Name of Employer (for Individual) FARMERS GROUP INC. Receipt For: Primary Other (specify)	or Full Organization Name State Zip Code 91320 C Occupation (for Individual) HEAD OF FIELD OPERATION: Aggregate Year-to-Date 784.0	
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FOR LINE NUMBER: PAGE 61 OF 166 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page 13 14 15 16

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NAME OF COMMITTEE (IN FUII) FARMERS GROUP, INC., FARMERS I INSURANCE EXCHANGE POLITICAL			
Full Name of Individual (Last, First, Middle Ini HOWARD, ROBERT P, , , Mailing Address 242 DALTON ST City VENTURA FEC ID number of contributing federal political committee. Name of Employer (for Individual) FARMERS INSURANCE EXCHANGE Receipt For: Primary Other (specify) Other (specify)	State CA C Occ CH		Date of Receipt M M M
Full Name of Individual (Last, First, Middle Ini HOWARD, ROBERT P, , , Mailing Address 242 DALTON ST City VENTURA FEC ID number of contributing federal political committee. Name of Employer (for Individual) FARMERS INSURANCE EXCHANGE Receipt For: Primary General Other (specify)	State CA	Zip Code 93003 Eupation (for Individual) IEF CLAIMS OFFICER Year-to-Date ▼ 260.00	Date of Receipt Mod 15 2018 Transaction ID : INCA166007 Amount of Each Receipt this Period 20.00 Memo Item
Full Name of Individual (Last, First, Middle Ini HOWARD, ROBERT P, , , Mailing Address 242 DALTON ST City VENTURA FEC ID number of contributing federal political committee. Name of Employer (for Individual) FARMERS INSURANCE EXCHANGE Receipt For: Primary General Other (specify)	State CA C CHI	Zip Code 93003 upation (for Individual) EF CLAIMS OFFICER Year-to-Date ▼ 260.00	Date of Receipt M M M / 29
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Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS INSURANCE EXCHANGE, FIRE INSURANCE EXCHANGE AND TRUCK INSURANCE EXCHANGE POLITICAL ACTION COMMITTEE AKA FARMERS INSURANCE PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name HUDSON, KENNETH D, , , Date of Receipt Mailing Address 6302 CONNIE LANE 2018 01 City Zip Code State Transaction ID: INCA165466 TX **COLLEYVILLE** 76034 Amount of Each Receipt this Period FEC ID number of contributing C 37.38 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS INSURANCE EXCHANGE **DIR CLAIMS FIELD OPS** Receipt For: Aggregate Year-to-Date ▼ Primary General 481.46 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. HUDSON, KENNETH D, , , Date of Receipt Mailing Address 6302 CONNIE LANE 06 15 2018 City State Zip Code Transaction ID: INCA166013 COLLEYVILLE TX 76034 Amount of Each Receipt this Period FEC ID number of contributing 37.38 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS INSURANCE EXCHANGE **DIR CLAIMS FIELD OPS** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 481.46 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. HUDSON, KENNETH D. , , Date of Receipt Mailing Address 6302 CONNIE LANE 29 2018 City State Zip Code Transaction ID: INCA166584 TX **COLLEYVILLE** 76034 Amount of Each Receipt this Period FEC ID number of contributing C 37.38 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS INSURANCE EXCHANGE **DIR CLAIMS FIELD OPS** Receipt For: Aggregate Year-to-Date ▼ Primary General 481.46 Other (specify) 112.14 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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FOR LINE NUMBER: PAGE 65 OF 166 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page 13 14 15 16

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FOR LINE NUMBER: PAGE 66 OF 166 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page 13 14 15 16

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	Mailing Address 110 SAN ANTONIO STREET 22	06 15 2018														
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FOR LINE NUMBER: PAGE 73 OF 166 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page 13 14 15 16

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	- 3	State		Zip Code	Transaction ID : INCA165573										
	REDONDO BEACH	CA		90278	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.		Ξ		20.00										
	Name of Employer (for Individual) FARMERS GROUP INC.	ion (for Individual) DF EXCHANGES FINANCE		N	/lem	o I	tem								
	Receipt For: Primary General Other (specify) ▼														
3.	Full Name of Individual (Last, First, Middle Initial) of KLUTE, PETER A, , ,	or Full O	rgar	nization Name	1	Date o	of Re	ece	eipt						
	Mailing Address 2001 BATAAN ROAD				06 15 2018										
	,	State		Zip Code		Transaction ID : INCA166120									
	REDONDO BEACH	CA		90278		Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.		_			20.00									
	Name of Employer (for Individual) FARMERS GROUP INC.		•	tion (for Individual) DF EXCHANGES FINANCE		Memo Item									
	Receipt For: Primary General Other (specify) ▼	ggregate	Yea	r-to-Date ▼ 260.00											
_).	Full Name of Individual (Last, First, Middle Initial) of KLUTE, PETER A, , ,	or Full O	rgar	nization Name		Date o	of Re	ece	eipt						
	Mailing Address 2001 BATAAN ROAD					M 06	И	′	2	_	/ Y	2018	Y		
		State		Zip Code	<u> </u>	Tran	sac	tio	n ID	: IN	ICA16	6688			
		CA		90278	- /	Amour	nt of	E	ach	Red	ceipt th	is Perio	d		
	FEC ID number of contributing federal political committee.		_		20.00								0.00		
	Name of Employer (for Individual) FARMERS GROUP INC.			ion (for Individual) OF EXCHANGES FINANCE		N	/lem	o I	ltem						
		ggregate	Yea	r-to-Date ▼											
	Primary General Other (specify)		-	260.00											
S	SUBTOTAL of Receipts This Page (optional)			·····			Ī	,			-	60	.00		
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T	'OTAL This Period (last page this line number only)	·····				-					45-				

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TEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a									
Any information copied from such Reports and State or for commercial purposes, other than using the												
NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS IN INSURANCE EXCHANGE POLITICAL A												
Full Name of Individual (Last, First, Middle Initial KUNI, JOEL D, , ,	al) or Full C	Organization Name	Date of Receipt									
Mailing Address 33401 NE 78TH ST City	State	Zip Code	06 01 2018									
CARNATION	WA	98014	Transaction ID : INCA165394 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		42.14									
Name of Employer (for Individual) FARMERS INSURANCE EXCHANGE	AC.	cupation (for Individual) TUARY FSA	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 539.28										
Full Name of Individual (Last, First, Middle Initials, KUNI, JOEL D, , ,	al) or Full C	Organization Name	Date of Receipt									
Mailing Address 33401 NE 78TH ST			06 15 2018									
City CARNATION	State WA	Zip Code 98014	Transaction ID : INCA165941 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		42.14									
Name of Employer (for Individual) FARMERS INSURANCE EXCHANGE		cupation (for Individual) TUARY FSA	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 539.28										
Full Name of Individual (Last, First, Middle Initial KUNI, JOEL D, , ,	al) or Full C	Organization Name	Date of Receipt									
Mailing Address 33401 NE 78TH ST		lan a	06 29 2018									
City CARNATION	State WA	Zip Code 98014	Transaction ID : INCA166512 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		42.14									
Name of Employer (for Individual) FARMERS INSURANCE EXCHANGE		upation (for Individual) FUARY FSA	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 539.28										
SUBTOTAL of Receipts This Page (optional)		•	126.42									
TOTAL This Period (last page this line number o	nly)	·····										

FOR LINE NUMBER: PAGE 77 OF 166 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS INSURANCE EXCHANGE, FIRE INSURANCE EXCHANGE AND TRUCK INSURANCE EXCHANGE POLITICAL ACTION COMMITTEE AKA FARMERS INSURANCE PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name LEE, RUSSELL, , , Date of Receipt Mailing Address 949 ELLESMERE WAY 01 2018 City Zip Code State Transaction ID: INCA165753 CA OAK PARK 91377 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) FARMERS GROUP INC. HEAD OF UNDERWRITING - PE Receipt For: Aggregate Year-to-Date ▼ Primary General 390.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. LEE, RUSSELL, , , Date of Receipt Mailing Address 949 ELLESMERE WAY 15 2018 City State Zip Code Transaction ID: INCA166298 OAK PARK CA 91377 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS GROUP INC. HEAD OF UNDERWRITING - PE Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 390.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. LEE, RUSSELL, , , Date of Receipt Mailing Address 949 ELLESMERE WAY 29 2018 City State Zip Code Transaction ID: INCA166865 CA OAK PARK 91377 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS GROUP INC. **HEAD OF UNDERWRITING - PE** Receipt For: Aggregate Year-to-Date ▼ Primary General 390.00 Other (specify) 90.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

FOR LINE NUMBER: PAGE 78 OF 166 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS INSURANCE EXCHANGE, FIRE INSURANCE EXCHANGE AND TRUCK INSURANCE EXCHANGE POLITICAL ACTION COMMITTEE AKA FARMERS INSURANCE PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name LEMAN, PETER, , , Date of Receipt Mailing Address 1115 EVENSTAR AVE 01 2018 City Zip Code State Transaction ID: INCA165725 WESTLAKE VILLAGE CA 91361 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) FARMERS GROUP INC. DIRECTOR OF AGENCY INNOVA Receipt For: Aggregate Year-to-Date ▼ Primary General 260.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** LEMAN, PETER, , , Date of Receipt Mailing Address 1115 EVENSTAR AVE 15 2018 City State Zip Code Transaction ID : INCA166271 WESTLAKE VILLAGE CA 91361 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS GROUP INC. DIRECTOR OF AGENCY INNOVA Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 260.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. LEMAN, PETER, , , Date of Receipt Mailing Address 1115 EVENSTAR AVE 29 2018 City State Zip Code Transaction ID: INCA166838 CA WESTLAKE VILLAGE 91361 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS GROUP INC. DIRECTOR OF AGENCY INNOVA Receipt For: Aggregate Year-to-Date ▼ Primary General 260.00 Other (specify) 60.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 7

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TEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Sta or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS IN INSURANCE EXCHANGE POLITICAL A			
Full Name of Individual (Last, First, Middle Initial LEWIS, DANIEL M, , , Mailing Address 2020 KEYSTONE DR City EL DORADO HILLS FEC ID number of contributing federal political committee. Name of Employer (for Individual) FARMERS GROUP INC. Receipt For: Primary General	State CA Occ HE		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Other (specify) ▼ Full Name of Individual (Last, First, Middle Initi.	al) or Full C	390.00 Organization Name	
B. LEWIS, DANIEL M, , , Mailing Address 2020 KEYSTONE DR City EL DORADO HILLS	State CA	Zip Code 95762	Date of Receipt M M M / D D / 2018 Transaction ID : INCA165896 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer (for Individual) FARMERS GROUP INC.		cupation (for Individual) AD OF AGENCY RECRUITING	30.00 Memo Item
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 390.00	
Full Name of Individual (Last, First, Middle Initi. LEWIS, DANIEL M, , , Mailing Address 2020 KEYSTONE DR	aı) or Full C		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City EL DORADO HILLS FEC ID number of contributing federal political committee. Name of Employer (for Individual) FARMERS GROUP INC. Receipt For: Primary General Other (specify)	HEA	Zip Code 95762 supation (for Individual) AD OF AGENCY RECRUITING Year-to-Date ▼ 390.00	Amount of Each Receipt this Period 30.00 Memo Item
SUBTOTAL of Receipts This Page (optional)		>	90.00
TOTAL This Period (last page this line number o	nly)		

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TEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and State or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS IN INSURANCE EXCHANGE POLITICAL A			
Full Name of Individual (Last, First, Middle Initial LEWIS, MICHELE I, , , Mailing Address 4047 MAURICE DR City NEWBURY PARK FEC ID number of contributing federal political committee. Name of Employer (for Individual) FARMERS GROUP INC. Receipt For: Primary General Other (specify)	State CA C	Zip Code 91320 supation (for Individual) OGRAM MANAGER II Year-to-Date ▼ 402.66	Date of Receipt M M M / D D / 2018 Transaction ID: INCA165677 Amount of Each Receipt this Period 31.55 Memo Item
Full Name of Individual (Last, First, Middle Initial LEWIS, MICHELE I, , , Mailing Address 4047 MAURICE DR City NEWBURY PARK FEC ID number of contributing federal political committee. Name of Employer (for Individual) FARMERS GROUP INC. Receipt For: Primary General Other (specify)	State CA C	Zip Code 91320 Supation (for Individual) OGRAM MANAGER II Year-to-Date ▼ 402.66	Date of Receipt Mo6 15 2018 Transaction ID: INCA166224 Amount of Each Receipt this Period 31.55 Memo Item
Full Name of Individual (Last, First, Middle Initial LEWIS, MICHELE I, , , Mailing Address 4047 MAURICE DR City NEWBURY PARK FEC ID number of contributing federal political committee. Name of Employer (for Individual) FARMERS GROUP INC. Receipt For: Primary General Other (specify)	State CA C	Zip Code 91320 supation (for Individual) DGRAM MANAGER II Year-to-Date 402.66	Date of Receipt Mo6 29 2018 Transaction ID: INCA166791 Amount of Each Receipt this Period 31.55 Memo Item
SUBTOTAL of Receipts This Page (optional)		>	94.65
TOTAL This Period (last page this line number of	nly)	>	

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Any information copied from such Reports and or for commercial purposes, other than using t				or the		ose (oliciting	contribut	ions				
NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS INSURANCE EXCHANGE POLITICA								ND TF	RUCK					
Full Name of Individual (Last, First, Middle I LINDEMANN, JOHN S, , , , Mailing Address 22435 SKYLAKE PLACE	nitial) or Full O	rganization Name		oate of	Re	ceipt	D	, ,	. Y . Y .	V				
City	State	Zip Code	06 01 2018 Transaction ID : INCA165304											
SANTA CLARITA FEC ID number of contributing federal political committee.	CA	91390	_ A	Amount of Each Receipt this Period										
Name of Employer (for Individual)	Name of Employer (for Individual) FARMERS GROUP INC. Occupation (for Individual) MARKETING CONS SR													
Receipt For: Primary General Other (specify) ▼														
Full Name of Individual (Last, First, Middle I	nitial) or Full O	rganization Name		ate of	Re	ceipt								
Mailing Address 22435 SKYLAKE PLACE City	State	Zip Code	06 15 2018											
SANTA CLARITA	CA	91390	Transaction ID : INCA165852 Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	С		20.00											
Name of Employer (for Individual) FARMERS GROUP INC.		upation (for Individual) RKETING CONS SR	Memo Item											
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 260.00												
Full Name of Individual (Last, First, Middle I	nitial) or Full O	rganization Name		ate of	Re	ceipt								
Mailing Address 22435 SKYLAKE PLACE City	State	Zip Code		M M M 06	/ acti		9	/ Y	2018 6424	Y				
SANTA CLARITA	CA	91390	A						is Period					
FEC ID number of contributing federal political committee.	С				_	,		- 9	20.0	00				
Name of Employer (for Individual) FARMERS GROUP INC.	I	upation (for Individual) RKETING CONS SR		Me	emo	Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 260.00												
SUBTOTAL of Receipts This Page (optional)			[,			60.0	00				
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		13		14		15	16		17

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		IE NUMBER	: PAGE	83 OF	166
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Detailed Summary Page	X 11a	11b	11c	12	
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FOR LINE NUMBER: PAGE 84 OF 166 (check only one)

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Any information copied from such Reports and or for commercial purposes, other than using the														
NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS INSURANCE EXCHANGE POLITICAL	INSURANC	E EXCHANGE, FIRE INSUR	ANCE	EXC	НА	NGE								
Full Name of Individual (Last, First, Middle Ir LINTON, MICHAEL, , , , Mailing Address 45 FREDRICK AVENUE	nitial) or Full O	organization Name		ate of	Re	ceipt	D	/ Y	- Y - Y -	Y				
City ATHERTON	State CA	Zip Code												
FEC ID number of contributing federal political committee.	al political committee.													
Name of Employer (for Individual) FARMERS GROUP INC. Receipt For: Primary General Other (specify) ▼	- " 	Me	emo	Item										
Full Name of Individual (Last, First, Middle In LINTON, MICHAEL, , , Mailing Address 45 FREDRICK AVENUE	L nitial) or Full O	Organization Name		ate of	Re				V	V				
City ATHERTON	State CA	Zip Code 94027					5 : IN	ICA166	2018 254 is Period					
FEC ID number of contributing federal political committee. Name of Employer (for Individual)	C	upation (for Individual)	20.00 Memo Item											
FARMERS GROUP INC. Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 260.00												
Full Name of Individual (Last, First, Middle Ir LINTON, MICHAEL, , , , Mailing Address 45 FREDRICK AVENUE	nitial) or Full O	organization Name		ate of		ceipt		/ Y	2018	Y				
City ATHERTON FEC ID number of contributing federal political committee.	State CA	Zip Code 94027	A					NCA166	5821 is Period 20.0	00				
Name of Employer (for Individual) FARMERS GROUP INC. Receipt For:	СНІІ	upation (for Individual) EF MARKETING OFFICER Year-to-Date ▼	i	Me	emo	Item		,						
Primary General Other (specify)		260.00												
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An	v information copied from such Reports and State	ements ma	av no	of be sold or used by any pe	rson f	13 14 15 16 son for the purpose of soliciting contributions										
	for commercial purposes, other than using the na															
\rangle	NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS INS INSURANCE EXCHANGE POLITICAL AC									AN[D TR	UCK				
١.	Full Name of Individual (Last, First, Middle Initial) LONGEWAY, CHRIS, , ,	or Full O	rgan	ization Name	[Date of	Re	ece	ipt							
	Mailing Address 1283 W DEERPATH RD					M M M	/	Γ		/	Y	2018	Y			
	City	State		Zip Code	Transaction ID : INCA165697											
	LAKE FOREST	IL		60045	_	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С			25.00											
	Name of Employer (for Individual) FARMERS GROUP INC.		•	on (for Individual) CENTRAL ST LEG AFF		Me	emo) It	em							
	Receipt For: Primary General Other (specify) ▼															
3.	Full Name of Individual (Last, First, Middle Initial) LONGEWAY, CHRIS, , ,	or Full O	rgan	ization Name		Date of	Re	ece	ipt							
	Mailing Address 1283 W DEERPATH RD					M M M	′			_ ′	Y		Y			
	City LAKE FOREST	State		Zip Code 60045		Transaction ID : INCA166244										
	FEC ID number of contributing federal political committee.	C	_			Amount of Each Receipt this Period 25.00										
	Name of Employer (for Individual) FARMERS GROUP INC.		•	on (for Individual) CENTRAL ST LEG AFF		Me	emo) It	em							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year	r-to-Date ▼ 325.00												
<u> </u>	Full Name of Individual (Last, First, Middle Initial) LONGEWAY, CHRIS, , ,	or Full O	rgan	ization Name		Date of	Re	ece	ipt							
	Mailing Address 1283 W DEERPATH RD City	State	ı	Zip Code] [06 Trans	/ 204:	L	29		Λ166	2018	Y			
	LAKE FOREST	IL		60045	A							s Period				
	FEC ID number of contributing federal political committee.	С					_	,		-	,	25.0	00			
	Name of Employer (for Individual) FARMERS GROUP INC.		•	on (for Individual) ENTRAL ST LEG AFF		Memo Item										
	Receipt For: Primary General	Aggregate	Year	r-to-Date ▼												
	Other (specify)		7	325.00												
s	UBTOTAL of Receipts This Page (optional)			>				,		-	,	75.0	00			
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	ny information copied from such Reports and State for commercial purposes, other than using the nat														
\rangle	NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS INSINSURANCE EXCHANGE POLITICAL AC														
١.	Full Name of Individual (Last, First, Middle Initial) LYONS, MICHELE L, , ,	or Full O	rgar	nization Name	1	Date o	of Re	ece	eipt						
	Mailing Address 5073 TOPANGA CANYON BLVD				06 01 / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y										
	City	State CA		Zip Code	Transaction ID : INCA165665										
	WOODLAND HILLS	CA		91364	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	C					_	7		_	7	25	.00		
	Name of Employer (for Individual) FARMERS INSURANCE EXCHANGE Receipt For:	HEA	AD C	tion (for Individual) DF CA AUTO CLAIMS		N	lemo	o It	em						
	Primary General Other (specify) ▼	aggregate	Yea	r-to-Date ▼ 325.00											
3.	Full Name of Individual (Last, First, Middle Initial) LYONS, MICHELE L, , ,	or Full O	rgar	nization Name		Date c	of Re	ece	eipt						
	Mailing Address 5073 TOPANGA CANYON BLVD				06 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y										
	City	State		Zip Code		Transaction ID : INCA166212									
	WOODLAND HILLS	CA		91364	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С						7			-	25	.00		
	Name of Employer (for Individual) FARMERS INSURANCE EXCHANGE		•	tion (for Individual) DF CA AUTO CLAIMS		M	lemo	o It	em						
	Receipt For: Primary General Other (specify) ▼	ggregate	Yea	ur-to-Date ▼ 325.00											
	Full Name of Individual (Last, First, Middle Initial) LYONS, MICHELE L, , ,	or Full O	rgar	nization Name	1	Date c	of Re	ece	eipt						
- •	Mailing Address 5073 TOPANGA CANYON BLVD					M = N			29]	Y	2018	Y		
	City WOODLAND HILLS	State CA		Zip Code 91364					n ID : I			779 s Period	1		
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Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS INSURANCE EXCHANGE, FIRE INSURANCE EXCHANGE AND TRUCK INSURANCE EXCHANGE POLITICAL ACTION COMMITTEE AKA FARMERS INSURANCE PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name MARSH, SUNIA Y,,, Date of Receipt Mailing Address 5021 COCO PLUM WAY 01 2018 City Zip Code State Transaction ID: INCA165643 FL **SARASOTA** 34241 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS INSURANCE EXCHANGE MANAGING ATTORNEY Receipt For: Aggregate Year-to-Date ▼ Primary General 325.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MARSH, SUNIA Y, , , Date of Receipt Mailing Address 5021 COCO PLUM WAY 15 2018 City State Zip Code Transaction ID: INCA166190 **SARASOTA** FL 34241 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS INSURANCE EXCHANGE MANAGING ATTORNEY Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 325.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. MARSH, SUNIA Y, , , Date of Receipt Mailing Address 5021 COCO PLUM WAY 29 2018 City State Zip Code Transaction ID: INCA166757 FL **SARASOTA** 34241 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS INSURANCE EXCHANGE MANAGING ATTORNEY Receipt For: Aggregate Year-to-Date ▼ Primary General 325.00 Other (specify) 75.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

FOR LINE NUMBER: PAGE 90 OF 166 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page 13 14 15 16

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FOR LINE NUMBER: PAGE 91 OF 166 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page 13 14 15 16

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NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS II INSURANCE EXCHANGE POLITICAL			
Full Name of Individual (Last, First, Middle Init MULDER, LEO E, , , Mailing Address 2054 S CHESANING DR S E City GRAND RAPIDS FEC ID number of contributing federal political committee. Name of Employer (for Individual) FARMERS GROUP INC. Receipt For: Primary General	State MI C Occ HE	Zip Code 49506 Lupation (for Individual) AD OF PROD MGMT - SPEC Year-to-Date ▼	Date of Receipt M M
Other (specify) ▼ Full Name of Individual (Last, First, Middle Init MULDER, LEO E, , , Mailing Address 2054 S CHESANING DR S E City	ial) or Full C	260.00 Organization Name Zip Code	Date of Receipt 06 15 2018
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			erson for the purpose of soliciting contributions to solicit contributions from such committee.										
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Mailing Address 3634 LANG RANCH PKV	VY												
City	State	Zip Code											
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\rangle	NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS INSU INSURANCE EXCHANGE POLITICAL ACT																	
١	Full Name of Individual (Last, First, Middle Initial) o NORDSTROM, SABRINA L, , ,	or Full O	rgar	nization Name	Date of Receipt													
	Mailing Address 19 WOODLAND LOOP								06 01 2018									
	,	State	Transaction ID : INCA165470															
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3.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name NORDSTROM, SABRINA L, , ,							Date of Receipt										
	Mailing Address 19 WOODLAND LOOP							06 15 2018										
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13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS INSURANCE EXCHANGE, FIRE INSURANCE EXCHANGE AND TRUCK INSURANCE EXCHANGE POLITICAL ACTION COMMITTEE AKA FARMERS INSURANCE PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name NUTTING, JAMES, , , Date of Receipt Mailing Address 1428 COLINA DRIVE 01 2018 City Zip Code State Transaction ID: INCA165566 CA **GLENDALE** 91208 Amount of Each Receipt this Period FEC ID number of contributing C 47.31 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) FARMERS GROUP INC. **CHIEF ACTUARY** Receipt For: Aggregate Year-to-Date ▼ Primary General 605.37 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. NUTTING, JAMES, , , Date of Receipt Mailing Address 1428 COLINA DRIVE 15 2018 City State Zip Code Transaction ID: INCA166113 **GLENDALE** CA 91208 Amount of Each Receipt this Period FEC ID number of contributing 47.31 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS GROUP INC. **CHIEF ACTUARY** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 605.37 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. NUTTING, JAMES, , , Date of Receipt Mailing Address 1428 COLINA DRIVE 29 2018 City State Zip Code Transaction ID: INCA166681 CA **GLENDALE** 91208 Amount of Each Receipt this Period FEC ID number of contributing C 47.31 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS GROUP INC. **CHIEF ACTUARY** Receipt For: Aggregate Year-to-Date ▼ Primary General 605.37 Other (specify) 141.93 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

FOR LINE NUMBER: PAGE 100 OF 166 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page 13 14 15 16

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FOR LINE NUMBER: PAGE 101 OF 166 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page 13 14 15 16

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FOR LINE NUMBER: PAGE 103 OF Use separate schedule(s) (check only one)

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\rangle	NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS INSUINSURANCE EXCHANGE POLITICAL ACT														
١.	Full Name of Individual (Last, First, Middle Initial) of OTOLSKI, BRIAN J, , ,	or Full Or	rganization Name	Date of Receipt											
	Mailing Address 7786 KENROB DR SE	06 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y													
		State	Zip Code	Transaction ID : INCA165423											
	GRAND RAPIDS	MI	49546	Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.			20.00											
	Name of Employer (for Individual) FARMERS GROUP INC.		pation (for Individual) D OF UNDERWRIT - SPEC	Memo Item											
		ggregate \	Year-to-Date ▼												
	Primary General Other (specify) ▼		260.00												
3.	Full Name of Individual (Last, First, Middle Initial) of OTOLSKI, BRIAN J, , ,	Date of Receipt													
	Mailing Address 7786 KENROB DR SE	06 15 2018													
	• •	State	Zip Code	Transaction ID : INCA165970											
	GRAND RAPIDS	MI	49546	Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.			20.00											
	Name of Employer (for Individual) FARMERS GROUP INC.		upation (for Individual) ND OF UNDERWRIT - SPEC	Memo Item											
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	Primary General Other (specify) ▼		, 260.00												
<u> </u>	Full Name of Individual (Last, First, Middle Initial) of OTOLSKI, BRIAN J, , ,	or Full Or	rganization Name	Date of Receipt											
	Mailing Address 7786 KENROB DR SE			06 29 2018											
	•	State MI	Zip Code	Transaction ID : INCA166541											
		IVII	49546	Amount of Each Receipt this Period											
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	Name of Employer (for Individual)	Occu	ipation (for Individual)	Memo Item											
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\rangle	NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS INS INSURANCE EXCHANGE POLITICAL AC															
١.	Full Name of Individual (Last, First, Middle Initial) OVENHOUSE, JULIE K, , ,				Date of Receipt											
	Mailing Address 11370 MAHOGANY RUN				06 01 2018 Transaction ID : INCA165502											
	City	State		Zip Code												
	FORT MYERS	FL		33913	Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	С			25.47											
	Name of Employer (for Individual) FARMERS INSURANCE EXCHANGE		•	on (for Individual) LAIMS MANAGER		M	emo	o It	tem							
	Receipt For:	ggregate	Year-	-to-Date ▼												
	Primary General Other (specify) ▼		7	331.11												
3.	Full Name of Individual (Last, First, Middle Initial) OVENHOUSE, JULIE K, , ,	or Full Or	rgani	zation Name		Date of	f Re	ece	eipt							
	Mailing Address 11370 MAHOGANY RUN			06 15 2018												
	City	State		Zip Code		Transaction ID : INCA166049										
	FORT MYERS	FL		33913	$ ^{\prime}$	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	C	-				_	7		_	7	25	.47			
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<u> </u>	Full Name of Individual (Last, First, Middle Initial) OVENHOUSE, JULIE K, , ,	or Full Or		Date of	f Re	ece	eipt									
	Mailing Address 11370 MAHOGANY RUN		1.	7		M = M 06			29)		2018	Y			
	City FORT MYERS	State FL		Zip Code 33913	<u> </u>						CA166					
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	Name of Employer (for Individual) FARMERS INSURANCE EXCHANGE			on (for Individual) _AIMS MANAGER		M	Memo Item									
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FOR LINE NUMBER: PAGE 105 OF 166 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page 13 14 15 16

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FOR LINE NUMBER: PAGE 108 OF 166 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page 13 14 15 16

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SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 109 OF Use separate schedule(s) (check only one)

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GREENVILLE FEC ID number of contributing federal political committee. Name of Employer (for Individual) FARMERS GROUP INC. Beggint For:	or Full Organization Name State Zip Code DE 19807 C Occupation (for Individual) PRESIDENT, 21ST CA & HI ggregate Year-to-Date ▼	Date of Receipt M M
Name of Employer (for Individual) FARMERS GROUP INC.	or Full Organization Name State Zip Code DE 19807 C Occupation (for Individual) PRESIDENT, 21ST CA & HI ggregate Year-to-Date ▼ 845.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer (for Individual) FARMERS GROUP INC.	Or Full Organization Name State Zip Code 19807 C Occupation (for Individual) PRESIDENT, 21ST CA & HI ggregate Year-to-Date ▼	Date of Receipt M M M / 29 / 2018 Transaction ID : INCA166374 Amount of Each Receipt this Period 65.00 Memo Item
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FOR LINE NUMBER: PAGE 110 OF 166 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 13 14 15 16

Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS INSURANCE EXCHANGE, FIRE INSURANCE EXCHANGE AND TRUCK INSURANCE EXCHANGE POLITICAL ACTION COMMITTEE AKA FARMERS INSURANCE PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name PICKETT, MICHAEL W, , , Date of Receipt Mailing Address 8105 W 130TH STREET 01 2018 City Zip Code State Transaction ID: INCA165330 OVERLAND PARK KS 66213 Amount of Each Receipt this Period FEC ID number of contributing C 30.75 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) FARMERS GROUP INC. AREA SALES MANAGER Receipt For: Aggregate Year-to-Date ▼ Primary General 393.52 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. PICKETT, MICHAEL W, , , Date of Receipt Mailing Address 8105 W 130TH STREET 15 2018 City State Zip Code Transaction ID: INCA165878 **OVERLAND PARK** KS 66213 Amount of Each Receipt this Period FEC ID number of contributing 30.75 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS GROUP INC. AREA SALES MANAGER Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 393.52 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. PICKETT, MICHAEL W, , , Date of Receipt Mailing Address 8105 W 130TH STREET 29 2018 City Zip Code State Transaction ID: INCA166450 KS **OVERLAND PARK** 66213 Amount of Each Receipt this Period FEC ID number of contributing C 30.75 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS GROUP INC. AREA SALES MANAGER Receipt For: Aggregate Year-to-Date ▼ Primary General 393.52 Other (specify) 92.25 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 7

FOR LINE NUMBER: PAGE 111 OF 166 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page 13 14 15 16

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FOR LINE NUMBER: PAGE 112 OF 166 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page 13 14 15 16

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Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS INSURANCE EXCHANGE, FIRE INSURANCE EXCHANGE AND TRUCK INSURANCE EXCHANGE POLITICAL ACTION COMMITTEE AKA FARMERS INSURANCE PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name PUTNAM, JOSHUA M, , , Date of Receipt Mailing Address 320 3RD AVE SW 2018 01 City Zip Code State Transaction ID: INCA165618 WA **PACIFIC** 98047 Amount of Each Receipt this Period FEC ID number of contributing C 20.97 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS GROUP INC. LIFE MARKETING MGR Receipt For: Aggregate Year-to-Date ▼ Primary General 267.99 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. PUTNAM, JOSHUA M, , , Date of Receipt Mailing Address 320 3RD AVE SW 06 15 2018 City State Zip Code Transaction ID: INCA166165 **PACIFIC** WA 98047 Amount of Each Receipt this Period FEC ID number of contributing 20.97 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS GROUP INC. LIFE MARKETING MGR Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 267.99 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. PUTNAM, JOSHUA M, , , Date of Receipt Mailing Address 320 3RD AVE SW 29 2018 City Zip Code State Transaction ID: INCA166733 WA **PACIFIC** 98047 Amount of Each Receipt this Period FEC ID number of contributing C 20.97 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS GROUP INC. LIFE MARKETING MGR Receipt For: Aggregate Year-to-Date ▼ Primary General 267.99 Other (specify) 62.91 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

SCHEDULE A (FEC Form 3X)

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FOR LINE NUMBER: PAGE 116 OF 166 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 13 14 15 16

Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS INSURANCE EXCHANGE, FIRE INSURANCE EXCHANGE AND TRUCK INSURANCE EXCHANGE POLITICAL ACTION COMMITTEE AKA FARMERS INSURANCE PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name ROBERTSON, DONI B, , , Date of Receipt Mailing Address 6510 SILVERTON DRIVE 01 2018 City Zip Code State Transaction ID: INCA165427 MI **BYRON CENTER** 49315 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS GROUP INC. HD OF BACK OFFICE AND PAR Receipt For: Aggregate Year-to-Date ▼ Primary General 325.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. ROBERTSON, DONI B, , , Date of Receipt Mailing Address 6510 SILVERTON DRIVE 15 2018 City State Zip Code Transaction ID: INCA165974 **BYRON CENTER** MI 49315 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS GROUP INC. HD OF BACK OFFICE AND PAR Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 325.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. ROBERTSON, DONI B, , , Date of Receipt Mailing Address 6510 SILVERTON DRIVE 29 2018 City Zip Code State Transaction ID: INCA166545 MI **BYRON CENTER** 49315 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS GROUP INC. HD OF BACK OFFICE AND PAR Receipt For: Aggregate Year-to-Date ▼ Primary General 325.00 Other (specify) 75.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

FOR LINE NUMBER: PAGE 117 OF 166 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page 13 14 15 16

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SCHEDULE A (FEC Form 3X)

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS INSURANCE EXCHANGE, FIRE INSURANCE EXCHANGE AND TRUCK INSURANCE EXCHANGE POLITICAL ACTION COMMITTEE AKA FARMERS INSURANCE PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name SADLER, ROBERT D, , , Date of Receipt Mailing Address 8036 CANOPY TERRACE 01 2018 City Zip Code State Transaction ID: INCA165645 FL **PARKLAND** 33076 Amount of Each Receipt this Period FEC ID number of contributing C 69.38 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) FARMERS GROUP INC. HEAD OF INDEPENDENT AGENC Receipt For: Aggregate Year-to-Date ▼ Primary General 890.11 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** SADLER, ROBERT D, , , Date of Receipt Mailing Address 8036 CANOPY TERRACE 15 2018 City State Zip Code Transaction ID: INCA166192 **PARKLAND** FL 33076 Amount of Each Receipt this Period FEC ID number of contributing 69.38 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS GROUP INC. HEAD OF INDEPENDENT AGENC Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 890.11 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. SADLER, ROBERT D. , , Date of Receipt Mailing Address 8036 CANOPY TERRACE 29 2018 City Zip Code State Transaction ID: INCA166759 FL **PARKLAND** 33076 Amount of Each Receipt this Period FEC ID number of contributing C 69.38 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS GROUP INC. HEAD OF INDEPENDENT AGENC Receipt For: Aggregate Year-to-Date ▼ Primary General 890.11 Other (specify) 208.14 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS INSURANCE EXCHANGE, FIRE INSURANCE EXCHANGE AND TRUCK INSURANCE EXCHANGE POLITICAL ACTION COMMITTEE AKA FARMERS INSURANCE PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name SELIN, BRUCE D, , , Date of Receipt Mailing Address 1351 BRECKFORD CT 01 2018 City Zip Code State Transaction ID: INCA165294 WESTLAKE VILLAGE CA 91361 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) FARMERS GROUP INC. **BUSINESS TECHNOLOGY DIREC** Receipt For: Aggregate Year-to-Date ▼ Primary General 260.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. SELIN, BRUCE D, , , Date of Receipt Mailing Address 1351 BRECKFORD CT 15 2018 City State Zip Code Transaction ID: INCA165842 WESTLAKE VILLAGE CA 91361 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS GROUP INC. **BUSINESS TECHNOLOGY DIREC** Receipt For: Aggregate Year-to-Date ▼ Primary General 260.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. SELIN, BRUCE D. , , Date of Receipt Mailing Address 1351 BRECKFORD CT 29 2018 City State Zip Code Transaction ID: INCA166414 CA WESTLAKE VILLAGE 91361 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS GROUP INC. **BUSINESS TECHNOLOGY DIREC** Receipt For: Aggregate Year-to-Date ▼ Primary General 260.00 Other (specify) 60.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS INSURANCE EXCHANGE, FIRE INSURANCE EXCHANGE AND TRUCK INSURANCE EXCHANGE POLITICAL ACTION COMMITTEE AKA FARMERS INSURANCE PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name SGOUREVA, RUSSINA, , , Date of Receipt Mailing Address 1001 TIVERTON AVE 01 2018 City Zip Code State Transaction ID: INCA165606 LOS ANGELES CA 90024 Amount of Each Receipt this Period FEC ID number of contributing C 56.23 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) FARMERS GROUP INC. HEAD OF BUSINESS TECH TRA Receipt For: Aggregate Year-to-Date ▼ Primary General 719.51 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. SGOUREVA, RUSSINA, , , Date of Receipt Mailing Address 1001 TIVERTON AVE 15 2018 City State Zip Code Transaction ID: INCA166153 LOS ANGELES CA 90024 Amount of Each Receipt this Period FEC ID number of contributing 56.23 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS GROUP INC. HEAD OF BUSINESS TECH TRA Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 719.51 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. SGOUREVA, RUSSINA, , , Date of Receipt Mailing Address 1001 TIVERTON AVE 29 2018 City Zip Code State Transaction ID: INCA166721 CA LOS ANGELES 90024 Amount of Each Receipt this Period FEC ID number of contributing C 56.23 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS GROUP INC. HEAD OF BUSINESS TECH TRA Receipt For: Aggregate Year-to-Date ▼ Primary General 719.51 Other (specify) 168.69 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 7

Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS INSURANCE EXCHANGE, FIRE INSURANCE EXCHANGE AND TRUCK INSURANCE EXCHANGE POLITICAL ACTION COMMITTEE AKA FARMERS INSURANCE PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name SHAW, ANNE M, , , Date of Receipt Mailing Address 2088 CHESWICK LANE 01 2018 City Zip Code State Transaction ID: INCA165679 IL **AURORA** 60503 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS INSURANCE EXCHANGE HIGH EXPOSURE ATTORNEY Receipt For: Aggregate Year-to-Date ▼ Primary General 520.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. SHAW, ANNE M, , , Date of Receipt Mailing Address 2088 CHESWICK LANE 15 2018 City State Zip Code Transaction ID: INCA166226 **AURORA** IL 60503 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS INSURANCE EXCHANGE HIGH EXPOSURE ATTORNEY Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 520.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. SHAW, ANNE M, , , Date of Receipt Mailing Address 2088 CHESWICK LANE 29 2018 City State Zip Code Transaction ID: INCA166793 IL **AURORA** 60503 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS INSURANCE EXCHANGE HIGH EXPOSURE ATTORNEY Receipt For: Aggregate Year-to-Date ▼ Primary General 520.00 Other (specify) 120.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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SCHEDULE A (FEC Form 3X)

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SCHEDULE A (FEC Form 3X)

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NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS IN INSURANCE EXCHANGE POLITICAL A			
Full Name of Individual (Last, First, Middle Initial SMITH, STEPHEN M, , , Mailing Address 614 DE SALES STREET City SAN GABRIEL FEC ID number of contributing federal political committee. Name of Employer (for Individual) FARMERS INSURANCE EXCHANGE Receipt For: Primary General Other (specify)	State CA Occ CLA		Date of Receipt 06 01 2018 Transaction ID : INCA165758 Amount of Each Receipt this Period 20.00 Memo Item
Full Name of Individual (Last, First, Middle Initial SMITH, STEPHEN M, , , Mailing Address 614 DE SALES STREET City SAN GABRIEL FEC ID number of contributing federal political committee. Name of Employer (for Individual) FARMERS INSURANCE EXCHANGE Receipt For: Primary General Other (specify)	State CA CC	Zip Code 91775 upation (for Individual) AIMS COVERAGE ATTORNEY Year-to-Date ▼ 260.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name of Individual (Last, First, Middle Initial SMITH, STEPHEN M, , , Mailing Address 614 DE SALES STREET City SAN GABRIEL FEC ID number of contributing federal political committee. Name of Employer (for Individual) FARMERS INSURANCE EXCHANGE Receipt For: Primary General Other (specify)	State CA CCCCLA	Zip Code 91775 upation (for Individual) IIMS COVERAGE ATTORNEY Year-to-Date ▼ 260.00	Date of Receipt M
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١.	Full Name of Individual (Last, First, Middle Initial SPERRY, CHANDA, , , Mailing Address 421 HORSEBACK HOLLOW	l) or Full O	rgan	nization Name			Date of	Re		pt	/ Y	YY	Y		
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3.	Full Name of Individual (Last, First, Middle Initial SPERRY, CHANDA, , , Mailing Address 421 HORSEBACK HOLLOW	l) or Full O	rgan	nization Name			ate of	Re		pt	/ Y	YY	Y		
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).	Full Name of Individual (Last, First, Middle Initial SPURLOCK, GREGORY A, , ,	l) or Full O	rgan	nization Name			ate of	Re	ceip	pt					
	Mailing Address 488 E OCEAN BLVD 408 City	State		Zip Code			06 01 2018 Transaction ID : INCA165575								
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FOR LINE NUMBER: PAGE 140 OF 166 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

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FOR LINE NUMBER: PAGE 141 OF 166 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 13 14 15 16

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City THOUSAND OAKS	State CA	Zip Code 91360	Transaction ID : INCA 100404									
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SCHEDULE A (FEC Form 3X)

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١.	Full Name of Individual (Last, First, Middle Initial WEINSTEIN, STEVEN H, , ,					Date of								
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	City GRANADA HILLS	State CA		Zip Code 91344								284 s Period		
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).	Full Name of Individual (Last, First, Middle Initial WILLIAMS, BOBBY G, , ,) or Full O	rgan	ization Name	[Date of	Re	ece	eipt					
	Mailing Address 21910 LEGEND POINT DR	State		Zip Code] [06 Trans	/ acti	L	01	J	Δ165	2018	Y	
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Full Name of Individual (Last, First, Middle Initial WILLIAMS, BOBBY G, , , Mailing Address 21910 LEGEND POINT DR City SAN ANTONIO FEC ID number of contributing federal political committee. Name of Employer (for Individual) FARMERS GROUP INC. Receipt For: Primary General Other (specify) Other (specify)	State TX C Occ SAL Aggregate	Zip Code 78258 upation (for Individual) .ES COACH Year-to-Date ▼ 204.24	Date of Receipt M M J D J 2018 Transaction ID: INCA166177 Amount of Each Receipt this Period 16.35 Memo Item
Full Name of Individual (Last, First, Middle Initial WILLIAMS, BOBBY G, , , Mailing Address 21910 LEGEND POINT DR City SAN ANTONIO FEC ID number of contributing federal political committee. Name of Employer (for Individual) FARMERS GROUP INC. Receipt For: Primary General Other (specify) ▼	State TX C Occ SAI	Zip Code 78258 upation (for Individual) LES COACH Year-to-Date ▼	Date of Receipt M M / 29 2018 Transaction ID : INCA166744 Amount of Each Receipt this Period 16.35 Memo Item
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13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS INSURANCE EXCHANGE, FIRE INSURANCE EXCHANGE AND TRUCK INSURANCE EXCHANGE POLITICAL ACTION COMMITTEE AKA FARMERS INSURANCE PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name WINTERING, CHRISTOPHER R,,, Date of Receipt Mailing Address 1637 KENYON DRIVE 15 2018 City Zip Code State Transaction ID: INCA165886 IL **NAPERVILLE** 60565 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS GROUP INC. **HEAD OF TERRITORY** Receipt For: Aggregate Year-to-Date ▼ Primary General 260.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. WINTERING, CHRISTOPHER R, , , Date of Receipt Mailing Address 1637 KENYON DRIVE 2018 City State Zip Code Transaction ID: INCA166458 **NAPERVILLE** IL 60565 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS GROUP INC. **HEAD OF TERRITORY** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 260.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. WITTMAN, JOHN M, , , Date of Receipt Mailing Address 409 SW 13TH ST 01 2018 City Zip Code State Transaction ID: INCA165512 MO **OAK GROVE** 64075-8500 Amount of Each Receipt this Period FEC ID number of contributing C 17.04 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS INSURANCE EXCHANGE FIELD CLAIMS MANAGER Receipt For: Aggregate Year-to-Date ▼ Primary General 212.00 Other (specify) 57.04 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

FOR LINE NUMBER: PAGE 154 OF 166 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 13 14 15 16

Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS INSURANCE EXCHANGE, FIRE INSURANCE EXCHANGE AND TRUCK INSURANCE EXCHANGE POLITICAL ACTION COMMITTEE AKA FARMERS INSURANCE PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name WITTMAN, JOHN M, , , Date of Receipt Mailing Address 409 SW 13TH ST 15 2018 City Zip Code State Transaction ID: INCA166059 MO OAK GROVE 64075-8500 Amount of Each Receipt this Period FEC ID number of contributing C 17.04 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS INSURANCE EXCHANGE FIELD CLAIMS MANAGER Receipt For: Aggregate Year-to-Date ▼ Primary General 212.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. WITTMAN, JOHN M, , , Date of Receipt Mailing Address 409 SW 13TH ST 2018 City State Zip Code Transaction ID: INCA166629 **OAK GROVE** MO 64075-8500 Amount of Each Receipt this Period FEC ID number of contributing 17.04 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS INSURANCE EXCHANGE FIELD CLAIMS MANAGER Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 212.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. WOLF, TERRI S, , , Date of Receipt Mailing Address 12461 W GENTLE RAIN RD 01 2018 City Zip Code State Transaction ID: INCA165283 ΑZ **PEORIA** 85383 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS GROUP INC. HR BUSINESS PARTNER Receipt For: Aggregate Year-to-Date ▼ Primary General 260.00 Other (specify) 54.08 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 7

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NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMER INSURANCE EXCHANGE POLITIC	S INSURANC	E EXCHANGE, FIRE INSUR	ANCE	EXC	НА	NGE					
Full Name of Individual (Last, First, Middle WOLF, TERRIS, , , Mailing Address 12461 W GENTLE RAIN	e Initial) or Full O		Date of Receipt								
City PEORIA	State AZ	Zip Code 85383		06 Trans		15 on ID :	: INC	A165	2018 831		
FEC ID number of contributing federal political committee.	С			inount	OI	Each	nece	ipt till	s Period 20.0	00	
Name of Employer (for Individual) FARMERS GROUP INC.		upation (for Individual) BUSINESS PARTNER	[Me	emo	Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 260.00									
Full Name of Individual (Last, First, Middle WOLF, TERRIS, , ,	·	rganization Name		ate of	Re						
Mailing Address 12461 W GENTLE RAIN F	State	Zip Code	- [06 Transa	ctic	29 on ID :)	L	2018 403	Y	
PEORIA	AZ	85383							s Period		
FEC ID number of contributing federal political committee.	С		[,	Ξ	7	20.0	00	
Name of Employer (for Individual) FARMERS GROUP INC.		upation (for Individual) BUSINESS PARTNER		Me	emo	Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 260.00									
Full Name of Individual (Last, First, Middle	Initial) or Full O	rganization Name		ate of	Re	ceipt					
Mailing Address 382 E. HILLTOP WAY	State	Zip Code] [06		01 on ID :			2018 595	Y	
THOUSAND OAKS	CA	91362	Α						s Period		
FEC ID number of contributing federal political committee.	С			Ξ	_	,	_	J	25.0	00	
Name of Employer (for Individual) FARMERS GROUP INC.		upation (for Individual) NAGER II-GOVERNMENT AND		Me	emo	Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 325.00									
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FOR LINE NUMBER: PAGE 156 OF 166 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS INSURANCE EXCHANGE, FIRE INSURANCE EXCHANGE AND TRUCK INSURANCE EXCHANGE POLITICAL ACTION COMMITTEE AKA FARMERS INSURANCE PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name WRIGHT, HEATHER N, , , Date of Receipt Mailing Address 382 E. HILLTOP WAY 15 2018 City Zip Code State Transaction ID: INCA166142 CA THOUSAND OAKS 91362 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS GROUP INC. MANAGER II-GOVERNMENT AND Receipt For: Aggregate Year-to-Date ▼ Primary General 325.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** WRIGHT, HEATHER N, , , Date of Receipt Mailing Address 382 E. HILLTOP WAY 2018 06 City State Zip Code Transaction ID: INCA166710 THOUSAND OAKS CA 91362 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) FARMERS GROUP INC. MANAGER II-GOVERNMENT AND Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 325.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 50.00 SUBTOTAL of Receipts This Page (optional)..... 14276.66 TOTAL This Period (last page this line number only).....

EMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check only	one) 22 X 23 26 27
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NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS INSURA EXCHANGE POLITICAL ACTION COMMITTE				CHANGE AND TRUCK INSURANCE
Full Name (Last, First, Middle Initial) BILL FOSTER FOR CONGRESS				Date of Disbursement
Mailing Address P.O. BOX 9104				06 28 2018
AURORA	State IL	Zip Code 60598		FEC Identification Number
Purpose of Disbursement Candidate Name			011	C C00435099 Transaction ID : EXPB166342
FOSTER, WILLIAM G., , ,	ment For:	2018	Category/ Type	Amount of Each Disbursement this Per 2000.00
Senate President	Primary Other (spe	x General cify) ▼		Memo Item
State: IL District: 11 Full Name (Last, First, Middle Initial) BUILDING LEADERSHIP AND INSPIR	ING NEW	/ ENTERPRIS	SE PAC	Date of Disbursement
Mailing Address P.O. BOX 96				06 28 2018
City ST. ELIZABETH Purpose of Disbursement		FEC Identification Number		
Candidate Name PAC, LEADERSHIP, , ,			O11 Category/ Type	Transaction ID : EXPB166353 Amount of Each Disbursement this Per
Office Sought: House Disburse Senate	ment For:	General	- , ,	2500.00
State: President District:	Other (spe	city)		Memo Item
Full Name (Last, First, Middle Initial) CARLOS CURBELO CONGRESS	Date of Disbursement			
Mailing Address 8724 SW 72ND STREET				06 22 2018
City Miami Purpose of Disbursement	State FL	Zip Code 33173		FEC Identification Number
Candidate Name CURBELO, CARLOS, , ,	011 Category/	Transaction ID : EXPB166340 Amount of Each Disbursement this Per		
	Primary	General	Type	1500.00
State: FL District: 26	Other (spe	city) \blacktriangledown		Memo Item

S	CHEDULE B (FEC Form 3X)			FOR LII	NE NUMBER:		PAG	E 158 OF	166
IT	EMIZED DISBURSEMENTS		ate schedule(s)	I `	only one)			07	
			Summary Page		1b 22 8a 28b	23 28c	26 29	27 30b	
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\rangle	NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS INSURAI EXCHANGE POLITICAL ACTION COMMITTEE				EXCHANGE	AND TRU	JCK INSI	JRANCE	
_	Full Name (Last, First, Middle Initial)								
Α.	CARLOS CURBELO CONGRESS				Date of	Disbursem		YYY	
	Mailing Address 8724 SW 72ND STREET				06	22	J' L	2018	
	City	State	Zip Code		FFC Ide	entification	Number		
	Miami	FL	33173						
	Purpose of Disbursement			1		C00546846	;	.	
				011	Tra	nsaction II	: EXPB1	166341	
	Candidate Name			Category/	Amount	of Each D	isburseme	ent this Per	riod
	CURBELO, CARLOS, , ,			Type	_			4000.00	
		nent For: 20				7		1000.00	_
		Primary Other (speci	x General y		п				
	State: FL District: 26	\	<i>,</i> , ,		Mei	mo Item			
	Full Name (Last, First, Middle Initial)								
В.	DENHAM FOR CONGRESS				Date of	Disbursem	ent		
					M = M	/ D D	/ Y	Y	1
	Mailing Address 2150 RIVER PLAZA DRIVE, SUITE				06	28		2018	
	,	State CA	Zip Code 95833		FEC Ide	entification	Number		
	Purpose of Disbursement	OA .	93033		C	200472272			
				011		C00473272			
	Candidate Name			Category/	_	nsaction II		1 66343 ent this Per	riod
	DENHAM, JEFF, , ,			Type	Amount	OI Lacii D	isbui sciiii	ont tino i ci	lou
		nent For: 20	018		TI			2500.00	.
		Primary	✗ General						
		Other (speci	fy)		Mei	mo Item			
_	State: CA District: 10 Full Name (Last, First, Middle Initial)								
C.	DIANE HARKEY FOR CONGRESS	3			Date of	Disbursem	ent		
	Diffice That Contone of				M = M	/ D D	/ Y	YYY	1
	Mailing Address 31878 DEL OBISPO #118-106				06	28	┚┖	2018	
	City	State	Zip Code		====				
	SAN JUAN CAPISTRANO	CA	92675		FEC Ide	entification	Number		
	Purpose of Disbursement					C00665513	3	.	
				011	Tra	nsaction II	D : EXPB	166348	
	Candidate Name			Category/	Amount	of Each D	isburseme	ent this Per	riod
	HARKEY, DIANE, , , Office Sought: House Disbursem	nent For: 20	240	Type				2500.00	\neg
		Primary	018 ∡ General			7	7	_555.55	_
		Other (speci	••						
	State: CA District: 49	(2)-0.	• •		Mei Mei	mo Item			
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 159 OF 16 (check only one)				
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	Check only one)				
		by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.				
EXCHANGE POLITICAL ACTION COMMITTEE		SURANCE EXCHANGE AND TRUCK INSURANCE CE PAC				
Full Name (Last, First, Middle Initial) A. DONOVAN FOR CONGRESS		Date of Disbursement				
Mailing Address P.O. BOX 60530		06 22 / 2018				
City STATEN ISLAND	State Zip Code NY 10306	FEC Identification Number				
Purpose of Disbursement		011 C C00571869 Transaction ID : EXPB166336				
Candidate Name DONOVAN, DAN, , ,		Category/ Type Amount of Each Disbursement this Period				
Office Sought: X House Disburser Senate X	nent For: 2018 Primary General	1000.00				
State: NY District: 11	Other (specify) ▼	Memo Item				
Full Name (Last, First, Middle Initial) B. FRIENDS OF DAVE JOYCE Mailing Address 320 KENARDEN DR.		Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
	State Zip Code					
CLEVELAND Purpose of Disbursement	C C00527457 Transaction ID : EXPB166354					
Candidate Name JOYCE, DAVID, , ,		Category/ Type Amount of Each Disbursement this Period				
Senate	nent For: 2018 Primary	1000.00				
State: OH District: 14	(-F4)	Memo Item				
Full Name (Last, First, Middle Initial) C. FRIENDS OF DON BEYER	•					
Mailing Address 1751 POTOMAC GREENS DRIVE		06 28 2018				
City ALEXANDRIA Purpose of Disbursement	State Zip Code VA 22314	FEC Identification Number C C00555888				
Candidate Name BEYER, DON, , ,	Candidate Name O11 Category/					
	nent For: 2018 Primary	Type 2500.00				
State: VA District: 08	—————————————————————————————————————	Memo Item				
SUBTOTAL of Disbursements This Page (optional)		4500.00				
TOTAL This Period (last page this line number only)						

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS INSURANCE EXCHANGE, FIRE INSURANCE EXCHANGE AND TRUCK INSURANCE EXCHANGE POLITICAL ACTION COMMITTEE AKA FARMERS INSURANCE PAC Full Name (Last, First, Middle Initial) A. FRIENDS OF PAT TOOMEY Mailing Address 228 S. WASHINGTON ST., SUITE 115 City ALEXANDRIA Purpose of Disbursement Candidate Name TOOMEY, PATRICK, , Office Sought: House President State: PA District: Full Name (Last, First, Middle Initial) B. GALLEGO FOR ARIZONA Mailing Address P.O. BOX 1710 City PHOENIX Purpose of Disbursement State Zip Code AZ FEC Identification Number FEC Identification Number FEC Identification Number FEC Identification Number C C C00558627	ITEMIZED DISBURSEMENTS	for each category of the	(check only	one)					
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS INSURANCE EXCHANGE, FIRE INSURANCE EXCHANGE AND TRUCK INSURANCE EXCHANGE POLITICAL ACTION COMMITTEE AKA FARMERS INSURANCE PAC Full Name (Last, First, Middle Initial) A. FRIENDS OF PAT TOOMEY Mailing Address 228 S. WASHINGTON ST., SUITE 115 City ALEXANDRIA Purpose of Disbursement TOOMEY, PATRICK, , , Office Sought: Full Name (Last, First, Middle Initial) B. GALLEGO FOR ARIZONA Mailing Address P.O. BOX 1710 State AZ Zip Code AZ Zip Code Sought AZ Zip Code AZ Zip Code AZ Zip Code AZ Zip Code BS001 FEC Identification Number Category/ Type Category/ Type Category/ Type Date of Disbursement Memo Item FEC Identification Number Category/ Type Category/		Detailed Summary 1 age	28a	28b 28c 29 30b					
FARMERS GROUP, INC., FARMERS INSURANCE EXCHANGE, FIRE INSURANCE EXCHANGE AND TRUCK INSURANCE EXCHANGE POLITICAL ACTION COMMITTEE AKA FARMERS INSURANCE PAC Full Name (Last, First, Middle Initial) A. FRIENDS OF PAT TOOMEY Mailing Address 228 S. WASHINGTON ST., SUITE 115 City ALEXANDRIA Purpose of Disbursement Candidate Name TOOMEY, PATRICK, , , Office Sought: Fell Name (Last, First, Middle Initial) B. GALLEGO FOR ARIZONA Mailing Address P.O. BOX 1710 City PHOENIX Purpose of Disbursement State State Zip Code AZ FEC Identification Number C C00558627									
A. FRIENDS OF PAT TOOMEY Mailing Address 228 S. WASHINGTON ST., SUITE 115 City ALEXANDRIA Purpose of Disbursement Candidate Name TOOMEY, PATRICK, , Office Sought: Full Name (Last, First, Middle Initial) B. GALLEGO FOR ARIZONA Mailing Address P.O. BOX 1710 City PHOENIX Purpose of Disbursement Date of Disbursement MMM O6	FARMERS GROUP, INC., FARMERS INSURAN	ICE EXCHANGE, FIRE INS AKA FARMERS INSURAN	SURANCE EX	CHANGE AND TRUCK INSURANCE					
Mailing Address 228 S. WASHINGTON ST., SUITE 115 City ALEXANDRIA Purpose of Disbursement Candidate Name TOOMEY, PATRICK, , , Office Sought: House President State: PA District: Full Name (Last, First, Middle Initial) B. GALLEGO FOR ARIZONA Mailing Address P.O. BOX 1710 City PHOENIX Purpose of Disbursement State: Zip Code AZ Zip Code AZ Zip Code AZ Zip Code AZ Zip Code AZ Zip Code AZ Zip Code AZ Zip Code AZ Zip Code AZ Zip Code AZ Zip Code AZ Zip Code AZ FEC Identification Number C C00461046 Transaction ID: EXPB166345 Amount of Each Disbursement this Period Memo Item FEC Identification Number C C00461046 Transaction ID: EXPB166345 Amount of Each Disbursement this Period Amount of Each Disbursement this Period Amount of Each Disbursement this Period Amount of Each Disbursement this Period Amount of Each Disbursement this Period Category/ Type C C00461046 Transaction ID: EXPB166345 Amount of Each Disbursement this Period Amount of Each Disbursement this Period Category/ Type C C00461046 Transaction ID: EXPB166345 Amount of Each Disbursement this Period C C00461046 Transaction ID: EXPB166345 Amount of Each Disbursement this Period C C00461046 Transaction ID: EXPB166345 Amount of Each Disbursement this Period C C00461046 Transaction Number C C00461046 Transaction Number C C00461046 Transaction ID: EXPB166345 Amount of Each Disbursement this Period C C00461046 Transaction Number C C00461046 Trans									
City ALEXANDRIA Purpose of Disbursement Candidate Name TOOMEY, PATRICK, , , Office Sought: VA Primary President President State: PA District: Full Name (Last, First, Middle Initial) B. GALLEGO FOR ARIZONA Mailing Address P.O. BOX 1710 City PHOENIX Purpose of Disbursement State State Zip Code 22314 Category/ Type Category/ Type Category/ Type Category/ Type Disbursement For: 2022 Amount of Each Disbursement this Period Memo Item Date of Disbursement M M M M M M M M M M M M M		115		M M / D D / Y Y Y					
ALEXANDRIA Purpose of Disbursement Candidate Name TOOMEY, PATRICK, , , Office Sought: House President State: PA District: Full Name (Last, First, Middle Initial) B. GALLEGO FOR ARIZONA Mailing Address P.O. BOX 1710 City PHOENIX Purpose of Disbursement City PHOENIX Purpose of Disbursement VA 22314 Other (specify) Transaction ID: EXPB166345 Amount of Each Disbursement this Period Category/ Type Category/ Type Category/ Type Category/ Type Condidate Name Category/ Type Condendate C C00461046 Transaction ID: EXPB166345 Amount of Each Disbursement this Period Memo Item Date of Disbursement FEC Identification Number C C00558627									
Candidate Name TOOMEY, PATRICK, , Office Sought: House President State: PA District: Full Name (Last, First, Middle Initial) B. GALLEGO FOR ARIZONA Mailing Address P.O. BOX 1710 City PHOENIX Purpose of Disbursement State: State Amount of Each Disbursement this Period General Other (specify) ▼ Memo Item Transaction ID: EXPB166345 Amount of Each Disbursement this Period Type 2500.00 Date of Disbursement FEC Identification Number C C00558627				FEC Identification Number					
Toomey, Patrick, , , Office Sought: House President State: PA District: Full Name (Last, First, Middle Initial) B. GALLEGO FOR ARIZONA Mailing Address P.O. BOX 1710 City PHOENIX Purpose of Disbursement Category/ Type Category/ Type Category/ Type 2500.00 Memo Item Memo Item Transaction ID: EXPB166345 Amount of Each Disbursement this Period 2500.00 Memo Item Transaction ID: EXPB166345 Amount of Each Disbursement this Period 2500.00 Date of Disbursement Memo Item FEC Identification Number C C00558627	Purpose of Disbursement			C C00461046					
TOOMEY, PATRICK, , , Office Sought: House Senate President State: PA District: Prull Name (Last, First, Middle Initial) B. GALLEGO FOR ARIZONA Mailing Address P.O. BOX 1710 Category, Type 2500.00 Memo Item Memo Item Date of Disbursement Memo Item Date of Disbursement City PHOENIX Purpose of Disbursement State Zip Code AZ 85001 Procedular Code State S	Candidate Name								
Office Sought: House Senate President State: PA District: Full Name (Last, First, Middle Initial) B. GALLEGO FOR ARIZONA Mailing Address P.O. BOX 1710 City PHOENIX Purpose of Disbursement Disbursement For: 2022 Z500.00 Memo Item Date of Disbursement Date of Disbursement FEC Identification Number C C00558627				Amount of Each Disbursement this Period					
State: PA District: Full Name (Last, First, Middle Initial) B. GALLEGO FOR ARIZONA Mailing Address P.O. BOX 1710 City PHOENIX Purpose of Disbursement State AZ S5001 FEC Identification Number C C00558627	Office Sought: House Disburseme		ZI	2500.00					
B. GALLEGO FOR ARIZONA Mailing Address P.O. BOX 1710 City PHOENIX Purpose of Disbursement Date of Disbursement Office State AZ Sp Code 85001 FEC Identification Number C C00558627		Other (specify) ▼		Memo Item					
Mailing Address P.O. BOX 1710 City PHOENIX Purpose of Disbursement State AZ State A	Full Name (Last, First, Middle Initial)								
City PHOENIX Purpose of Disbursement State AZ Zip Code 85001 FEC Identification Number C C00558627	B. GALLEGO FOR ARIZONA								
PHOENIX Purpose of Disbursement AZ 85001 C C00558627	Mailing Address P.O. BOX 1710	_		06 28 2018					
Purpose of Disbursement C C00558627		·		FEC Identification Number					
VII		011	C C00558627						
Candidate Name	Candidate Name		Transaction ID : EXPB166355						
GALLEGO, RUBEN, , , Category/ Type Amount of Each Disbursement this Period	GALLEGO, RUBEN, , ,			Amount of Each Disbursement this Period					
Office Sought: House Disbursement For: 2018				1000.00					
Senate	⊢ <u> </u>								
State: AZ District: 07		other (specify)		Memo Item					
Full Name (Last, First, Middle Initial) C. GPAVES FOR CONGRESS Date of Disbursement	-			Date of Dishursement					
C. GRAVES FOR CONGRESS Date of Disbursement	GRAVES FOR CONGRESS								
Mailing Address 2345 GRAND BLVD., STE 2400 06 28 2018	Mailing Address 2345 GRAND BLVD., STE 2400	Mailing Address 2345 GRAND BLVD., STE 2400							
City State Zip Code FEC Identification Number MO 64108	,	'		FEC Identification Number					
Purpose of Disbursement C C00359034				C C00359034					
Candidate Name O11 Transaction ID : EXPB166346 Amount of Each Disbursement this Period		Candidate Name							
GRAVES, SAM, , ,	055 0			1000.00					
Office Sought: House Disbursement For: 2018 1000.00	Senate x F	Primary General		1000.00					
State: MO District: 06 Other (specify) ▼ Memo Item		outer (specify) ▼		Memo Item					
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE 1	_				
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Any information copied from such Reports and Statem or for commercial purposes, other than using the nam							
NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS INSURAN EXCHANGE POLITICAL ACTION COMMITTEE			CHANGE AND TRUCK INSURANCE				
Full Name (Last, First, Middle Initial) A. HANDEL FOR CONGRESS, INC.			Date of Disbursement				
Mailing Address 4010 OLD MILTON PKWY.			06 28 2018				
ALPHARETTA	State Zip Code GA 30005		FEC Identification Number				
Purpose of Disbursement Candidate Name		011	C C00633362 Transaction ID : EXPB166347				
HANDEL, KAREN CHRISTINE, , ,	nent For: 2018	Category/ Type	Amount of Each Disbursement this Period				
Senate	Primary		Memo Item				
State: GA District: 06 Full Name (Last, First, Middle Initial)			Wellio Itelli				
B. JOE MORELLE FOR CONGRESS			Date of Disbursement				
Mailing Address P.O. BOX 90914	State Zip Code		06 28 2018				
City S ROCHESTER Purpose of Disbursement		FEC Identification Number C C00675108					
Candidate Name MORELLE, JOSEPH D., , ,		011 Category/ Type	Transaction ID : EXPB166356 Amount of Each Disbursement this Period				
Office Sought: House Disbursem	nent For: 2018 Primary General	Туре	2500.00				
President State: NY District: 25	Other (specify)		Memo Item				
Full Name (Last, First, Middle Initial) C. KEVIN MCCARTHY FOR CONGRI							
Mailing Address P.O. BOX 12667			06 28 2018				
BAKERSFIELD	State Zip Code CA 93389		FEC Identification Number C C00420935				
Candidate Name	Category/						
MCCARTHY, KEVIN, , , Office Sought: House Senate Disbursem	Type	2500.00					
President State: CA District: 23	Other (specify) ▼		Memo Item				
SUBTOTAL of Disbursements This Page (optional)			6000.00				
TOTAL This Period (last page this line number only).		··············	4				

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 162 OF 166					
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)					
	Detailed Summary Page	21b 28a	22 X 23 26 27 28b 28c 29 30b					
Any information copied from such Reports and Staten	I nents may not be sold or us	ed by any perso	on for the purpose of soliciting contributions					
or for commercial purposes, other than using the nam								
NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS INSURAL EXCHANGE POLITICAL ACTION COMMITTEE			CHANGE AND TRUCK INSURANCE					
Full Name (Last, First, Middle Initial)								
A. LARSON FOR CONGRESS			Date of Disbursement					
Mailing Address P.O. BOX 261172			06 28 2018					
City S HARTFORD	State Zip Code CT 06126		FEC Identification Number					
Purpose of Disbursement	00120		C C00330142					
		011	Transaction ID : EXPB166350					
Candidate Name		Category/	Amount of Each Disbursement this Period					
LARSON, JOHN B., , , Office Sought: Y House Disbursen	nent For: 2018	Type	1500.00					
	Primary		1300.00					
	Other (specify) ▼		Memo Item					
Full Name (Last, First, Middle Initial)								
B. LOU CORREA FOR CONGRESS			Date of Disbursement					
Mailing Address P.O BOX 2229	_		06 22 2018					
,	State Zip Code CA 92079		FEC Identification Number					
SAN MARCOS Purpose of Disbursement	C C00578302							
•	011	Transaction ID : EXPB166334						
Candidate Name		Category/	Amount of Each Disbursement this Period					
CORREA, JOSE LUIS, , ,		Туре	4000.00					
	nent For: 2018 Primary 🗶 General		1000.00					
	Primary General Other (specify)							
State: CA District: 46	(-		Memo Item					
Full Name (Last, First, Middle Initial)								
C. RANDY HULTGREN FOR CONGR	RESS		Date of Disbursement					
Mailing Address P.O. BOX 717	Mailing Address P.O. BOX 717							
City	State Zip Code		FEC Identification Number					
ST. CHARLES	IL 60174							
Purpose of Disbursement		011	C C00467522					
Candidate Name			Transaction ID: EXPB166358 Amount of Each Disbursement this Period					
HULTGREN, RANDY, , ,	Category/ Type	Amount of Each Disbursement this Period						
Office Sought: House Disbursen	000							
	Primary General							
State: IL District: 14	Other (specify) ▼		Memo Item					
Sidio. IL District. 14								
SUBTOTAL of Disbursements This Page (optional)		······	3000.00					
TOTAL This Period (last page this line number only)								

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER (check only one)	PAGE 163 OF 166				
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 22 28a 28b	X 23 26 27 28c 29 30b				
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam							
NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS INSURAN EXCHANGE POLITICAL ACTION COMMITTEE			E AND TRUCK INSURANCE				
Full Name (Last, First, Middle Initial) A. ROSKAM FOR CONGRESS COMI	MITTEE	Date of	of Disbursement				
Mailing Address PO BOX 713		06	22 2018				
WHEATON	State Zip Code IL 60187		dentification Number				
Purpose of Disbursement Candidate Name			C00410969 ansaction ID : EXPB166337				
ROSKAM, PETER, , ,	nent For: 2018	Category/ Amoun	nt of Each Disbursement this Period				
Senate	Primary x General Other (specify) ▼		emo Item				
State: IL District: 06 Full Name (Last, First, Middle Initial)			one non				
B. SMUCKER FOR CONGRESS		Date of	of Disbursement				
Mailing Address 548 STEEL WAY	State Zip Code	06	22 2018				
City S LANCASTER Purpose of Disbursement	FEC I	dentification Number					
Candidate Name		011 Tr Category/ Amount	ansaction ID : EXPB166335 nt of Each Disbursement this Period				
	nent For: 2018 Primary 🗶 General	Туре	1000.00				
	Other (specify)	М	emo Item				
Full Name (Last, First, Middle Initial) STEVE KNIGHT FOR CONGRESS	Full Name (Last, First, Middle Initial)						
Mailing Address PO BOX 730		06	28 2018				
HILMAR	State Zip Code 95324	FEC	dentification Number				
Candidate Name	Purpose of Disbursement Candidate Name						
	nent For: 2018 Primary 🗶 General	Category/ Type	2500.00				
President State: CA District: 25	Other (specify) ▼	М	emo Item				
SUBTOTAL of Disbursements This Page (optional)			4500.00				
TOTAL This Period (last page this line number only)							

SCHEDULE B (FEC Form 3X)	Lies congrete ashedule(s)				
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only one) 21b 22 X 23 26 27 28a 28b 28c 29 30b			
		d by any person for the purpose of soliciting contributions I committee to solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS INSURAL EXCHANGE POLITICAL ACTION COMMITTEE		SURANCE EXCHANGE AND TRUCK INSURANCE ICE PAC			
Full Name (Last, First, Middle Initial) A. STEVE PAC	Date of Disbursement				
Mailing Address 228 S WASHINGTON STREET ST	E 115	06 01 2018			
ALEXANDRIA	State Zip Code VA 22314	FEC Identification Number			
Purpose of Disbursement Candidate Name	011 C C00501478 Transaction ID : EXPB163047				
PAC, Leadership, , , Office Sought: House Disbursen	Category/ Type Amount of Each Disbursement this Period 5000.00				
Senate President	Primary General Other (specify) ▼	Memo Item			
State: District: Full Name (Last, First, Middle Initial)					
B. STEVE RUSSELL FOR CONGRES	Date of Disbursement				
Mailing Address P.O. BOX 55689	State Zip Code	06 22 2018			
,	OK 73155	FEC Identification Number C C00558510			
Candidate Name RUSSELL, STEVE, , ,		Transaction ID : EXPB166339 Category/ Type Amount of Each Disbursement this Perior			
Office Sought: House Disburser	1000.00				
State: OK District: 05	Other (specify)	Memo Item			
Full Name (Last, First, Middle Initial) C. TED LIEU FOR CONGRESS		Date of Disbursement			
Mailing Address 16633 VENTURA BLVD., SUITE 10	008	06 22 2018			
City S ENCINO Purpose of Disbursement	State Zip Code CA 91436	FEC Identification Number			
Candidate Name	[O11 C C00556506 Transaction ID : EXPB166338 Amount of Each Disbursement this Perior			
Senate	nent For: 2018 Primary	Type 1000.00			
State: CA District: 33	Other (specify) ▼	Memo Item			
SUBTOTAL of Disbursements This Page (optional)		7000.00			
TOTAL This Period (last page this line number only)					

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 165 OF 166		
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only one)			
	Detailed Summary Page	21b 28a	22 X 23 26 27 28b 28c 29 30b		
Any information copied from such Reports and Stater	nents may not be sold or use	d by any perso	on for the purpose of soliciting contributions		
or for commercial purposes, other than using the nan					
NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS INSURA EXCHANGE POLITICAL ACTION COMMITTEI	NCE EXCHANGE, FIRE INS E AKA FARMERS INSURAN	SURANCE EX	CHANGE AND TRUCK INSURANCE		
Full Name (Last, First, Middle Initial)					
A. VARGAS FOR CONGRESS	Date of Disbursement				
Mailing Address 330 ENCINITAS BLVD., SUITE 10			06 22 2018		
City ENCINITAS	State Zip Code CA 92024		FEC Identification Number		
Purpose of Disbursement			C C00497321		
	011				
Candidate Name VARGAS, JUAN, , ,		Category/	Amount of Each Disbursement this Period		
	ment For: 2018	Туре	2000.00		
Senate President	Primary x General Other (specify) ▼		Memo Item		
State: CA District: 51			Limena non		
Full Name (Last, First, Middle Initial) B. YODER FOR CONGRESS INC.			Date of Disbursement		
B. YODER FOR CONGRESS, INC.	M M / D D / Y Y Y Y				
Mailing Address P.O. BOX 26742			06 28 2018		
,	State Zip Code KS 66225		FEC Identification Number		
OVERLAND PARK Purpose of Disbursement	C C00472365 Transaction ID : EXPB166359				
·					
Candidate Name		Category/ Type	Amount of Each Disbursement this Period		
YODER, KEVIN, , , Office Sought: Y House Disburser	2500.00				
	nent For: 2018 Primary General		200.00		
President		Memo Item			
State: KS District: 03			Wello Itelli		
Full Name (Last, First, Middle Initial) C. YOUNG KIM FOR CONGRESS			Date of Disbursement		
5. FOUNG KIM FOR CONGRESS	M M / D D / Y Y Y				
Mailing Address P.O. BOX 2186			06 28 2018		
	State Zip Code		FEC Identification Number		
FULLERTON Purpose of Disbursement	CA 92837		C C00665638		
		011	Transaction ID : EXPB166352		
Candidate Name		Category/	Amount of Each Disbursement this Period		
KIM, YOUNG, , , Office Sought: Y House Disburser	ment For: 2018	Туре	2500.00		
Office Sought:	Primary X General		2500.00		
President	Other (specify) ▼		Memo Item		
State: CA District: 39			Welle fell		
SUBTOTAL of Disbursements This Page (optional)			7000.00		
			7 7 7		
TOTAL This Period (last page this line number only)			1		

SCHEDULE B (FEC Form 3X) TEMIZED DISBURSEMENTS	Use separate schedule(s) FOR LINE NUMBER: (check only one)				PAGE 166 OF 160		
I LIVIIZED DISBURSEIVIEN IS		for each category of the Detailed Summary Page		22 🗶 2	23 26 27 28c 29 30b		
Any information copied from such Reports and Stater or for commercial purposes, other than using the nan							
NAME OF COMMITTEE (In Full) FARMERS GROUP, INC., FARMERS INSURA EXCHANGE POLITICAL ACTION COMMITTEE				CHANGE AND	TRUCK INSURANCE		
Full Name (Last, First, Middle Initial) A. ZELDIN FOR CONGRESS		Date of Disbursement					
Mailing Address 47 FLINTLOCK DR				06	28 2018		
SHIRLEY	State NY	Zip Code 11967		FEC Identifica	ation Number		
Purpose of Disbursement Candidate Name	011	C C00552547 Transaction ID : EXPB166357					
ZELDIN, LEE, , , Office Sought: Market Disbursement For: 2018				Amount of Each Disbursement this Period 1000.00			
Senate President	Primary Other (speci	∡ General y		Memo Item			
State: NY District: 01 Full Name (Last, First, Middle Initial)							
Mailing Address				Date of Disbu	ursement		
	State	Zip Code		البا			
Purpose of Disbursement		FEC Identification Number					
Candidate Name	Category/ Type	Amount of Each Disbursement this Period					
Office Sought:							
State: District:	Other (speci-	iy)		Memo Item			
Full Name (Last, First, Middle Initial)				Date of Disbu	ursement		
Mailing Address				IVI - IVI /			
City	State	Zip Code		FEC Identification	ation Number		
Purpose of Disbursement				C			
Candidate Name			Category/ Type	Amount of Ea	ach Disbursement this Period		
Office Sought: House				□ Mana han			
	· •			Memo Ite	3111		